

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

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Grow the Majority

ADDRESS (number and street)

228 S Washington St Suite 115

Check if different  
than previously  
reported. (ACC)

Alexandria

VA

22304

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00858373

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 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)
- ☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)
- ☐ Termination Report  
(TER)

(b) Monthly  
Report  
Due On:

- ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11)  
(Non-Election  
Year Only)
- ☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12)  
(Non-Election  
Year Only)
- ☐ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

(c) 12-Day  
PRE-Election  
Report for the:

- ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12S)

Election on

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

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

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

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

in the  
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
04 01 2026

through

M M M / D D D / Y Y Y Y Y Y  
06 30 2026

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

Type or Print Name of Treasurer

LISKER, LISA, , ,

Signature of Treasurer

LISKER, LISA, , ,

Date

M M M / D D D / Y Y Y Y Y Y  
07 15 2026

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

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Grow the MajorityReport Covering the Period: From: 

|     |   |     |   |           |
|-----|---|-----|---|-----------|
| M M | / | D D | / | Y Y Y Y Y |
| 04  |   | 01  |   | 2026      |

 To: 

|     |   |     |   |           |
|-----|---|-----|---|-----------|
| M M | / | D D | / | Y Y Y Y Y |
| 06  |   | 30  |   | 2026      |

|                                                                                                                  | COLUMN A<br>This Period                      | COLUMN B<br>Calendar Year-to-Date            |
|------------------------------------------------------------------------------------------------------------------|----------------------------------------------|----------------------------------------------|
| 6. (a) Cash on Hand<br>January 1, <div><div>Y Y Y Y Y</div><div>2026</div></div>                                 |                                              | <div><div></div><div>2900205.92</div></div>  |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....                                                        | <div><div></div><div>10609208.00</div></div> |                                              |
| (c) Total Receipts (from Line 19) .....                                                                          | <div><div></div><div>12394944.34</div></div> | <div><div></div><div>38879713.40</div></div> |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....              | <div><div></div><div>23004152.34</div></div> | <div><div></div><div>41779919.32</div></div> |
| 7. Total Disbursements (from Line 31) .....                                                                      | <div><div></div><div>17452708.95</div></div> | <div><div></div><div>36228475.93</div></div> |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)).....                         | <div><div></div><div>5551443.39</div></div>  | <div><div></div><div>5551443.39</div></div>  |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | <div><div></div><div>0.00</div></div>        |                                              |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | <div><div></div><div>0.00</div></div>        |                                              |



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

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 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Grow the Majority

Report Covering the Period:

From:

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  |   | 01  |   | 2026    |

To:

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 30  |   | 2026    |

**I. Receipts**
**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

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

11267318.77

37099494.32

(ii) Unitemized .....

100.00

355.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

11267418.77

37099849.32

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

1103500.00

1589000.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) .....

12370918.77

38688849.32

## 12. Transfers From Affiliated/Other

Party Committees.....

24025.57

190864.08

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3) .....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

## 19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c)) .....

12394944.34

38879713.40

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

12394944.34

38879713.40

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

| II. Disbursements                                                                              | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|------------------------------------------------------------------------------------------------|-------------------------------|-----------------------------------|
| 21. Operating Expenditures:                                                                    |                               |                                   |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4)                                  |                               |                                   |
| (i) Federal Share .....                                                                        | 0.00                          | 0.00                              |
| (ii) Non-Federal Share.....                                                                    | 0.00                          | 0.00                              |
| (b) Other Federal Operating Expenditures .....                                                 | 2244259.98                    | 3905609.60                        |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                        | 2244259.98                    | 3905609.60                        |
| 22. Transfers to Affiliated/Other Party Committees.....                                        | 15208448.97                   | 32322866.33                       |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 0.00                          | 0.00                              |
| 24. Independent Expenditures (use Schedule E) .....                                            | 0.00                          | 0.00                              |
| 25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....                | 0.00                          | 0.00                              |
| 26. Loan Repayments Made.....                                                                  | 0.00                          | 0.00                              |
| 27. Loans Made.....                                                                            | 0.00                          | 0.00                              |
| 28. 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 28(a), (b), and (c)).....                            | 0.00                          | 0.00                              |
| 29. Other Disbursements (Including Non-Federal Donations).....                                 | 0.00                          | 0.00                              |
| 30. Federal Election Activity (52 U.S.C. § 30101(20))                                          |                               |                                   |
| (a) Allocated Federal Election Activity (from Schedule H6)                                     |                               |                                   |
| (i) Federal Share .....                                                                        | 0.00                          | 0.00                              |
| (ii) "Levin" Share.....                                                                        | 0.00                          | 0.00                              |
| (b) Federal Election Activity Paid Entirely With Federal Funds .....                           | 0.00                          | 0.00                              |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....            | 0.00                          | 0.00                              |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..      | 17452708.95                   | 36228475.93                       |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 17452708.95                   | 36228475.93                       |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

| <b>III. Net Contributions/<br/>Operating Expenditures</b>                            | <b>COLUMN A<br/>Total This Period</b> | <b>COLUMN B<br/>Calendar Year-to-Date</b> |
|--------------------------------------------------------------------------------------|---------------------------------------|-------------------------------------------|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....        | 12370918.77                           | 38688849.32                               |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                            | 0.00                                  | 0.00                                      |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....    | 12370918.77                           | 38688849.32                               |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) ..... | 2244259.98                            | 3905609.60                                |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3).....                 | 0.00                                  | 0.00                                      |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....              | 2244259.98                            | 3905609.60                                |

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

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

FOR LINE NUMBER: PAGE 6 OF 198

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TULL, THOMAS, , MR.,**

Mailing Address 227 WEST MONROE STREET

City  
CHICAGO

State  
IL

Zip Code  
60606-5001

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
INVESTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500000.00

Date of Receipt

04 / 01 / 2026

**Transaction ID : SA11A.2141334**

Amount of Each Receipt this Period

250000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTON

State  
VA

Zip Code  
22219-1891

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4863373.78

Date of Receipt

04 / 01 / 2026

**Transaction ID : SA11C.2121448**

Amount of Each Receipt this Period

10500.00

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DEBENEDICTIS, NICHOLAS, ,**

Mailing Address 209 DAVID DRIVE

City  
HAVERTOWN

State  
PA

Zip Code  
19083-1019

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

04 / 01 / 2026

**Transaction ID : SA11A.2121449**

Amount of Each Receipt this Period

3000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

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

253000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 198

(check only one)

|                                         |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13             | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  | <input type="checkbox"/> 16 |
| <input type="checkbox"/> 17             |                              |                              |                             |

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KANE, NORMAN, , ,**

Mailing Address 4323 VISTA DE LA SIERRA

City  
DEL MARState  
CAZip Code  
92014-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ORTHO MEDICAL GROUPOccupation (for Individual)  
ORTHOPEDIC SURGEON

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 01 / 2026

Transaction ID : SA11A.2121450

Amount of Each Receipt this Period

2500.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OLIPHANT, DON, , ,**

Mailing Address PO BOX 446

City  
RANCHO SANTA FEState  
CAZip Code  
92067-0446FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DWO ENTERPRISESOccupation (for Individual)  
REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 01 / 2026

Transaction ID : SA11A.2121451

Amount of Each Receipt this Period

5000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

4863373.78

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 04 / 2026

Transaction ID : SA11C.2125824

Amount of Each Receipt this Period

100000.00

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

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

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

7500.00

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

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

FOR LINE NUMBER: PAGE 8 OF 198

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HARRISON, FRANK, W., , III**

Mailing Address 6615 SEWANEE AVE

City  
HOUSTON

State  
TX

Zip Code  
77005-3749

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOUSTON ENERGY L.P.

Occupation (for Individual)  
CO-FOUNDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

110000.00

Date of Receipt

MM / DD / YYYY  
04 / 04 / 2026

**Transaction ID : SA11A.2125825**

Amount of Each Receipt this Period

100000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HARRISON, FRANK, W., , III**

Mailing Address 6615 SEWANEE AVE

City  
HOUSTON

State  
TX

Zip Code  
77005-3749

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOUSTON ENERGY L.P.

Occupation (for Individual)  
CO-FOUNDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

110000.00

Date of Receipt

MM / DD / YYYY  
04 / 06 / 2026

**Transaction ID : SA11A.2141332**

Amount of Each Receipt this Period

- 10000.00

☐ Memo Item

CONTRIBUTION

2026 AGGREGATE; DEBIT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTON

State  
VA

Zip Code  
22219-1891

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

4863373.78

Date of Receipt

MM / DD / YYYY  
04 / 07 / 2026

**Transaction ID : SA11C.2134089**

Amount of Each Receipt this Period

10000.00

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

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

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

90000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 9 OF 198  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HARRISON, FRANK, W., , III**

Mailing Address 6615 SEWANEE AVE

City  
HOUSTONState  
TXZip Code  
77005-3749FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOUSTON ENERGY L.P.Occupation (for Individual)  
CO-FOUNDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

110000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 07 / 2026**Transaction ID : SA11A.2134090**

Amount of Each Receipt this Period

10000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BAILEY, WILLIAM, C., , JR.**

Mailing Address 2431 PINE VIEW DR. NW

City  
ARABState  
ALZip Code  
35016-4598FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RADIANCE TECHNOLOGIESOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

120000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 09 / 2026**Transaction ID : SA11A.2137810**

Amount of Each Receipt this Period

100000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BLUE, J., NEAL, ,**

Mailing Address 9756 LA JOLLA FARMS RD

City  
LA JOLLAState  
CAZip Code  
92037-1133FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GENERAL ATOMICSOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 09 / 2026**Transaction ID : SA11A.2137806**

Amount of Each Receipt this Period

100000.00

☐ Memo Item

CONTRIBUTION

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

210000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 198

(check only one)

|                                                |                              |                              |                             |
|------------------------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="checked" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13                    | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  | <input type="checkbox"/> 16 |
| <input type="checkbox"/> 17                    |                              |                              |                             |

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BRAY, STEVEN, R., ,**

Mailing Address 115 VIA CORDOVA

City  
NEWPORT BEACHState  
CAZip Code  
92663-4624FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
POWER PLUSOccupation (for Individual)  
PRESIDENT/C.E.O.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

46600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 09 / 2026

Transaction ID : SA11A.2137813

Amount of Each Receipt this Period

46600.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DIGGDON, ANN, , ,**

Mailing Address 7595 SETON HALL ST

City  
LA MESAState  
CAZip Code  
91942-1707FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 09 / 2026

Transaction ID : SA11A.2137807

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FEDER, DAN, , ,**

Mailing Address 3636 NOBEL DR. #100

City  
SAN DIEGOState  
CAZip Code  
92122-1042FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FNF INCOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 09 / 2026

Transaction ID : SA11A.2137809

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

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

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

54100.00

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

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

FOR LINE NUMBER: PAGE 11 OF 198

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOLLANDER, DANA, , ,**

Mailing Address 46 BLUE HERON

City  
IRVINE

State  
CA

Zip Code  
92603-0307

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKER

Occupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

12500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 09 / 2026

Transaction ID : SA11A.2137820

Amount of Each Receipt this Period

12500.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HOLLANDER, YOSSIE, , ,**

Mailing Address 46 BLUE HERON

City  
IRVINE

State  
CA

Zip Code  
92603-0307

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NEWCHEM 21

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

12500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 09 / 2026

Transaction ID : SA11A.2137822

Amount of Each Receipt this Period

12500.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JACQUIN, DAVID, , ,**

Mailing Address 580 CALIFORNIA ST

City  
SAN FRANCISCO

State  
CA

Zip Code  
94104-1000

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NORTH POINT MERGERS AND ACQUISITIONS

Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

12500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 09 / 2026

Transaction ID : SA11A.2137823

Amount of Each Receipt this Period

12500.00

☐ Memo Item

CONTRIBUTION

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

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

37500.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 12 OF 198  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JACQUIN, HEIDI, , ,**

Mailing Address 580 CALIFORNIA ST

City  
SAN FRANCISCOState  
CAZip Code  
94104-1000FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

12500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 09 / 2026

Transaction ID : SA11A.2137821

Amount of Each Receipt this Period

12500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCMILLIN, SCOTT, , ,**

Mailing Address 1043 OCEAN BLVD

City  
CORONADOState  
CAZip Code  
92118-2840FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MCMILLIN COMPANIESOccupation (for Individual)  
REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 09 / 2026

Transaction ID : SA11A.2137808

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PODLICH, WILLIAM, F., ,**

Mailing Address 360 E 1ST ST #592

City  
TUSTINState  
CAZip Code  
92780-3211FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 09 / 2026

Transaction ID : SA11A.2137814

Amount of Each Receipt this Period

50000.00

☐ Memo Item  
CONTRIBUTION

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

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

67500.00

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

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

FOR LINE NUMBER: PAGE 13 OF 198

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RYAN, CHARLES, E., MR.,**

Mailing Address 104 SUMMERE HILL LN

City  
WAYNE

State  
PA

Zip Code  
19087-4767

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ALMAZ CAPITAL

Occupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 09 / 2026

Transaction ID : SA11A.2141335

Amount of Each Receipt this Period

10000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SIMMS, RONALD, A., ,**

Mailing Address 9320 WILSHIRE BLVD SUITE 300

City  
BEVERLY HILLS

State  
CA

Zip Code  
90212-3218

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SIMMS, INC.

Occupation (for Individual)  
PRINCIPAL/REAL ESTATE DEVELOP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 09 / 2026

Transaction ID : SA11A.2137812

Amount of Each Receipt this Period

10000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SADBERRY, THOMAS, W., , JR.**

Mailing Address 5465 MOREHOUSE DR. #260

City  
SAN DIEGO

State  
CA

Zip Code  
92121-4714

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 09 / 2026

Transaction ID : SA11A.2137818

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

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

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

25000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 14 OF 198  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VALACH, KENNETH , J., MR.,**

Mailing Address 750 TOWN &amp; COUNTRY BLVD STE 520

City  
HOUSTONState  
TXZip Code  
77024-4161FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CROW HOLDINGS DEVELOPMENTOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 09 / 2026

Transaction ID : SA11A.2137811

Amount of Each Receipt this Period

50000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VANDERSLOOT, BELINDA, , ,**

Mailing Address 4609 WEST 65TH WEST

City  
IDAHO FALLSState  
IDZip Code  
83402-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230415.38

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 09 / 2026

Transaction ID : SA11A.2137817

Amount of Each Receipt this Period

230415.38

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VANDERSLOOT, FRANK, L., MR.,**

Mailing Address 4609 65TH ROAD NORTH

City  
IDAHO FALLSState  
IDZip Code  
83401-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MELALEUCA INCOccupation (for Individual)  
FOUNDER & FORMER CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

231800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 09 / 2026

Transaction ID : SA11A.2137816

Amount of Each Receipt this Period

231800.00

☐ Memo Item  
CONTRIBUTION

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

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

512215.38

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 OF 198

(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LANCTOT, LAWRENCE, R., ,**

Mailing Address 425 CALIFORNIA ST 25TH FL

City  
SAN FRANCISCOState  
CAZip Code  
94104-2102FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYEDOccupation (for Individual)  
LAWYER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 15 / 2026

Transaction ID : SA11A.2150496

Amount of Each Receipt this Period

750.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NAU, JOHN, L., MR., III**

Mailing Address P.O. BOX 130130

City  
HOUSTONState  
TXZip Code  
77219-0130FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SILVER EAGLE BEVERAGESOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 15 / 2026

Transaction ID : SA11A.2172753

Amount of Each Receipt this Period

100000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

4863373.78

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 15 / 2026

Transaction ID : SA11C.2150494

Amount of Each Receipt this Period

5000.00

☒ Memo Item  
CONTRIBUTIONSEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

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

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

100750.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 16 OF 198  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOKHBERY, JAVAD, , ,**

Mailing Address 15 SAN SIMEON

City  
LAGUNA NIGUELState  
CAZip Code  
92677-7951FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FUTEKOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 15 / 2026

Transaction ID : SA11A.2150495

Amount of Each Receipt this Period

5000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ALVIS, STEVE, A., ,**

Mailing Address 8827 W SAM HOUSTON PKWY N #200

City  
HOUSTONState  
TXZip Code  
77040-5383FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NEW QUEST PROPERTIESOccupation (for Individual)  
DEVELOPER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

58551.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 16 / 2026

Transaction ID : SA11A.2205207

Amount of Each Receipt this Period

8551.69

☐ Memo Item

CONTRIBUTION

IN KIND: CATERING

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BAILEY, RICHARD, , ,**

Mailing Address 3926 VOLTAIRE STREET

City  
SAN DIEGOState  
CAZip Code  
92107-1841FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SAN DIEGO BAY RENTALSOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 16 / 2026

Transaction ID : SA11A.2150503

Amount of Each Receipt this Period

2500.00

☐ Memo Item

CONTRIBUTION

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

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

16051.69

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

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

FOR LINE NUMBER: PAGE 17 OF 198

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HOM, DAN, , ,**

Mailing Address 101 WEST BROADWAY

City  
SAN DIEGO

State  
CA

Zip Code  
92101-8201

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FOCUSCOM INC

Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

04 / 16 / 2026

Transaction ID : SA11A.2150504

Amount of Each Receipt this Period

5000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LANSING, LAINEY, , ,**

Mailing Address 15743 VIA DE SANTA FE

City  
RANCHO SANTA FE

State  
CA

Zip Code  
92067-

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LANSING COMPANIES

Occupation (for Individual)  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

04 / 16 / 2026

Transaction ID : SA11A.2150500

Amount of Each Receipt this Period

5000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. QUINN, JAMES, , ,**

Mailing Address 5930 CAMINO DE LA COSTA

City  
LA JOLLA

State  
CA

Zip Code  
92037-6550

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AMERICAN PROPERTY ENTERPRISES

Occupation (for Individual)  
R.E. INVESTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

04 / 16 / 2026

Transaction ID : SA11A.2150501

Amount of Each Receipt this Period

5000.00

☐ Memo Item

CONTRIBUTION

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

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

15000.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 OF 198

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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)

Grow the Majority

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SIGNORELLI, DANIEL, K., ,

Mailing Address 1401 WOODLANDS PARKWAY

City  
THE WOODLANDSState  
TXZip Code  
77380-1122FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
THE SIGNORELLI COMPANYOccupation (for Individual)  
CEO/FOUNDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

33551.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 16 / 2026

Transaction ID : SA11A.2205208

Amount of Each Receipt this Period

8551.69

☐ Memo Item

CONTRIBUTION

IN KIND: CATERING

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STENNES, RICHARD, , ,

Mailing Address 2533 CALLE DEL ORO

City  
SAN DIEGOState  
CAZip Code  
92037-2005FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 16 / 2026

Transaction ID : SA11A.2150502

Amount of Each Receipt this Period

2500.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WINRED

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

4863373.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 17 / 2026

Transaction ID : SA11C.2152422

Amount of Each Receipt this Period

15000.00

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

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

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

11051.69

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 OF 198

(check only one)

|                                         |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13             | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  | <input type="checkbox"/> 16 |
| <input type="checkbox"/> 17             |                              |                              |                             |

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STEARNS, GLENN, , ,**

Mailing Address 1 CANYON TERRACE

City  
NEWPORT BEACHState  
CAZip Code  
92657-1700FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KIND LENDING LLCOccupation (for Individual)  
MORTGAGE LENDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 17 / 2026

Transaction ID : SA11A.2152423

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. YESCALIS, JESS, , ,**

Mailing Address 513 WEST CAMPBELL AVENUE

City  
PHOENIXState  
AZZip Code  
85013-2920FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
YCSOccupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 20 / 2026

Transaction ID : SA11A.2164459

Amount of Each Receipt this Period

- 1000.00

☐ Memo Item

CONTRIBUTION

2026 AGGREGATE; EARMARKED BY WINRED -  
CHARGED BACK

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

4863373.78

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 20 / 2026

Transaction ID : SA11C.2166591

Amount of Each Receipt this Period

25000.00

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

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

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

14000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 OF 198

(check only one)

|                                                |                              |                              |                             |                             |                             |                             |                             |                             |
|------------------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="checked" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MILLER, JEFFREY, , ,**Mailing Address 450 ALTON ROAD  
1610City  
MIAMI BEACHState  
FLZip Code  
33139-6718FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MILLER STRATEGIES, LLCOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 20 / 2026

Transaction ID : SA11A.2166592

Amount of Each Receipt this Period

25000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ASHER, ROBERT, B., MR.,**

Mailing Address 1307 TOWNSHIP LINE RD BOX 305

City  
GWYNEDD VALLEYState  
PAZip Code  
19437-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ASHER'S CHOCOLATESOccupation (for Individual)  
CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 22 / 2026

Transaction ID : SA11A.2169061

Amount of Each Receipt this Period

10000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. AVERILL, DAN, L., ,**

Mailing Address PO BOX 275

City  
BIGFORKState  
MTZip Code  
59911-0275FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AVECO PROPERTIES INCOccupation (for Individual)  
DEVELOPER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 22 / 2026

Transaction ID : SA11A.2169059

Amount of Each Receipt this Period

2500.00

☐ Memo Item

CONTRIBUTION

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

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

37500.00

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

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

FOR LINE NUMBER: PAGE 21 OF 198

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DICKSON, PAUL, M., , SR.**

Mailing Address P.O. BOX 51367

City  
SHREVEPORT

State  
LA

Zip Code  
71135-1367

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

04 / 22 / 2026

Transaction ID : SA11A.2169058

Amount of Each Receipt this Period

100000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KLINSKY, STEVEN, B., MR.,**

Mailing Address 1633 BROADWAY

City  
NEW YORK

State  
NY

Zip Code  
10019-6708

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NEW MOUNTAIN CAPITAL

Occupation (for Individual)  
C.E.O.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

04 / 22 / 2026

Transaction ID : SA11A.2169060

Amount of Each Receipt this Period

100000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SETZMAN, DANIEL, , ,**

Mailing Address 374 WEST 11TH STREET  
APT 9

City  
NEW YORK

State  
NY

Zip Code  
10014-6250

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JANE STREET

Occupation (for Individual)  
FINANCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

376600.00

Date of Receipt

04 / 22 / 2026

Transaction ID : SA11A.2172754

Amount of Each Receipt this Period

376600.00

☐ Memo Item  
CONTRIBUTION

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

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

576600.00

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

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

FOR LINE NUMBER: PAGE 22 OF 198

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTON

State  
VA

Zip Code  
22219-1891

FEC ID number of contributing  
federal political committee.

**C** C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4863373.78

Date of Receipt

**04** / **22** / **2026**

**Transaction ID : SA11C.2170866**

Amount of Each Receipt this Period

50000.00

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. KEMMERER, JOHN, L., , III**

Mailing Address P.O. BOX 6848

City  
JACKSON

State  
WY

Zip Code  
83002-6848

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Occupation (for Individual)

KEMMERER MANAGEMENT CORP.

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

**04** / **22** / **2026**

**Transaction ID : SA11A.2170867**

Amount of Each Receipt this Period

25000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. MILLER, LORI, A., ,**

Mailing Address 3950 LAUREL CANYON BLVD UNIT 1969

City  
STUDIO CITY

State  
CA

Zip Code  
91614-7065

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Occupation (for Individual)

RETIRED

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

**04** / **22** / **2026**

**Transaction ID : SA11A.2170868**

Amount of Each Receipt this Period

25000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

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

50000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 OF 198

(check only one)

|                                         |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13             | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  | <input type="checkbox"/> 16 |
| <input type="checkbox"/> 17             |                              |                              |                             |

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.**C**

C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4863373.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 23 / 2026

Transaction ID : SA11C.2170994

Amount of Each Receipt this Period

3500.00

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MACK, EARLE, , ,**

Mailing Address 1950 SOUTH OCEAN BOULEVARD

City  
PALM BEACHState  
FLZip Code  
33480-5100FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 23 / 2026

Transaction ID : SA11A.2170995

Amount of Each Receipt this Period

3500.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.**C**

C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4863373.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 24 / 2026

Transaction ID : SA11C.2172758

Amount of Each Receipt this Period

35615.70

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

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

3500.00

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

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 24 OF 198  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CORIC, VLADIMIR, , MR.,**

Mailing Address 381 BOSTON POST RD

City  
MADISONState  
CTZip Code  
06443-2934FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BIOHAVENOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50826.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 24 / 2026

Transaction ID : SA11A.2172760

Amount of Each Receipt this Period

25000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HASHEMI, NOOSHEEN, , ,**

Mailing Address 1259 EL CAMINO REAL PMB 88

City  
MENLO PARKState  
CAZip Code  
94025-4208FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JANUARY AIOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

253500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 24 / 2026

Transaction ID : SA11A.2172762

Amount of Each Receipt this Period

3500.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KING, CHARLES, , ,**

Mailing Address 4 CHATSWORTH COURT

City  
LAWRENCE TOWNSHIPState  
NJZip Code  
08648-1081FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
1919 INVESTMENT COUNSELOccupation (for Individual)  
ASSET MANAGEMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 24 / 2026

Transaction ID : SA11A.2172761

Amount of Each Receipt this Period

3500.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

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

32000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 OF 198

(check only one)

|                                         |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13             | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  | <input type="checkbox"/> 16 |
| <input type="checkbox"/> 17             |                              |                              |                             |

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MICIT, DANIEL, , ,**

Mailing Address 220 PONCE DE LEON PL UNIT 307

City  
DECATURState  
GAZip Code  
30030-3253FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DM CAPITALOccupation (for Individual)  
MANAGING MEMBER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7115.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 24 / 2026

Transaction ID : SA11A.2172759

Amount of Each Receipt this Period

3615.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHILDS, JOHN, , ,**

Mailing Address 165 SAGO PALM ROAD

City  
VERO BEACHState  
FLZip Code  
32963-3702FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
J.W. CHILDS ASSOCIATESOccupation (for Individual)  
INVESTMENTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 27 / 2026

Transaction ID : SA11A.2182904

Amount of Each Receipt this Period

25000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

4863373.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 27 / 2026

Transaction ID : SA11C.2180744

Amount of Each Receipt this Period

1033.06

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

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

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

28615.70

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 OF 198

(check only one)

|                                         |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13             | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  | <input type="checkbox"/> 16 |
| <input type="checkbox"/> 17             |                              |                              |                             |

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KOZMETSKY, AARON, , ,**

Mailing Address 3949 MAPLE AVE

City  
DALLASState  
TXZip Code  
75219-3200FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KMS VENTURESOccupation (for Individual)  
INVESTMENTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1033.06

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 27 / 2026

Transaction ID : SA11A.2180745

Amount of Each Receipt this Period

1033.06

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NIEHAUS, ROBERT, H., ,**

Mailing Address 770 PARK AVENUE

City  
NEW YORKState  
NYZip Code  
10021-4153FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
G.C.P. CAPITAL PARTNERSOccupation (for Individual)  
INVESTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 28 / 2026

Transaction ID : SA11A.2185315

Amount of Each Receipt this Period

100000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

4863373.78

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 28 / 2026

Transaction ID : SA11C.2185121

Amount of Each Receipt this Period

5000.00

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

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

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

101033.06

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 27 OF 198  
(check only one)

|                                         |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13             | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  | <input type="checkbox"/> 16 |
| <input type="checkbox"/> 17             |                              |                              |                             |

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DAO, TU, , ,**

Mailing Address 5601 CHAMPIONS DRIVE

City  
PLANOState  
TXZip Code  
75093-4229FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ORTHOMEDOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 28 / 2026

Transaction ID : SA11A.2185122

Amount of Each Receipt this Period

5000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4863373.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 30 / 2026

Transaction ID : SA11C.2189409

Amount of Each Receipt this Period

1033.06

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MORFORD, CRAIG, , ,**

Mailing Address 3513 POTOMAC AVE

City  
DALLASState  
TXZip Code  
75205-2217FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RPM, INTLOccupation (for Individual)  
BOARD OF DIRECTORS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1033.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 30 / 2026

Transaction ID : SA11A.2189410

Amount of Each Receipt this Period

1033.06

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

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

6033.06

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

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

FOR LINE NUMBER: PAGE 28 OF 198

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JAIN, ANURAG, , ,**

Mailing Address 5938 NORWAY ROAD

City  
DALLAS

State  
TX

Zip Code  
75230-4004

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
PEROT JAIN LP

Occupation (for Individual)  
MANAGING PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

**05 / 01 / 2026**

**Transaction ID : SA11A.2216843**

Amount of Each Receipt this Period

10000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTON

State  
VA

Zip Code  
22219-1891

FEC ID number of contributing  
federal political committee.

**C** C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4863373.78

Date of Receipt

**05 / 01 / 2026**

**Transaction ID : SA11C.2189683**

Amount of Each Receipt this Period

6033.06

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GONZALES, JOHN, , ,**

Mailing Address 101 COLORADO STREET, APT. 1208

City  
AUSTIN

State  
TX

Zip Code  
78701-4115

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
US CHAMBER OF COMMERCE

Occupation (for Individual)  
EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1033.06

Date of Receipt

**05 / 01 / 2026**

**Transaction ID : SA11A.2189684**

Amount of Each Receipt this Period

1033.06

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

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

11033.06

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

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

FOR LINE NUMBER: PAGE 29 OF 198

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KALIS, PETER, , ,**

Mailing Address 7223 TORY LANE

City  
NAPLES

State  
FL

Zip Code  
34108-8789

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

MM / DD / YYYY  
05 / 01 / 2026

Transaction ID : SA11A.2189685

Amount of Each Receipt this Period

5000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTON

State  
VA

Zip Code  
22219-1891

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4863373.78

Date of Receipt

MM / DD / YYYY  
05 / 04 / 2026

Transaction ID : SA11C.2199730

Amount of Each Receipt this Period

16198.35

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JOHNS, JOHN, , ,**

Mailing Address 2749 SOUTHWOOD ROAD

City  
BIRMINGHAM

State  
AL

Zip Code  
35223-1228

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

MM / DD / YYYY  
05 / 04 / 2026

Transaction ID : SA11A.2199733

Amount of Each Receipt this Period

10000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

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

15000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 OF 198

(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEWIS, J., KEET, ,**

Mailing Address 3750 DUCHESS TRAIL

City  
DALLASState  
TXZip Code  
75229-5219FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELFOccupation (for Individual)  
CONSIDERING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1033.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 04 / 2026

Transaction ID : SA11A.2199732

Amount of Each Receipt this Period

1033.06

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MARCHANT, KENNY, , ,**

Mailing Address 2125 NORTH JOSEY LANE

City  
CARROLLTONState  
TXZip Code  
75006-2995FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5165.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 04 / 2026

Transaction ID : SA11A.2199731

Amount of Each Receipt this Period

5165.29

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

4863373.78

Date of Receipt

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

Transaction ID : SA11C.2199830

Amount of Each Receipt this Period

37000.00

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

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

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

6198.35

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 31 OF 198  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CARNEY, CRAIG, , ,**

Mailing Address 4588 HINTON DRIVE

City  
PLANOState  
TXZip Code  
75024-6350FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CARNEY ENGINEERING, PLLCOccupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : SA11A.2199832

Amount of Each Receipt this Period

1000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HURLEY, SYD, , ,**

Mailing Address 2227 VANTAGE ST.

City  
DALLASState  
TXZip Code  
75207-6101FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
VISTA PROEPRTY CO.Occupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

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

Transaction ID : SA11A.2199833

Amount of Each Receipt this Period

25000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RAMSEY, DAVID, , ,**

Mailing Address 4558 OAK SHORES DRIVE

City  
PLANOState  
TXZip Code  
75024-7351FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HEXT FINANCIAL GROUPOccupation (for Individual)  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : SA11A.2199834

Amount of Each Receipt this Period

1000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

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

27000.00

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

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

FOR LINE NUMBER: PAGE 32 OF 198

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SILVERMAN, MICHAEL, , ,**

Mailing Address 2828 HOOD STREET #1006

City  
DALLAS

State  
TX

Zip Code  
75219-7809

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CRESSET CAPITAL

Occupation (for Individual)  
CHIEF INVESTMENT OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

MM / DD / YYYY  
05 / 05 / 2026

**Transaction ID : SA11A.2199831**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. QUINTILIAN, JOSEPH, , ,**

Mailing Address 801 SOUTH OLIVE AVENUE

City  
WEST PALM BEACH

State  
FL

Zip Code  
33401-6120

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DISTRIBUTED CAPITAL PARTNERS

Occupation (for Individual)  
VENTURE CAPITAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

MM / DD / YYYY  
05 / 06 / 2026

**Transaction ID : SA11A.2216845**

Amount of Each Receipt this Period

50000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTON

State  
VA

Zip Code  
22219-1891

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

4863373.78

Date of Receipt

MM / DD / YYYY  
05 / 06 / 2026

**Transaction ID : SA11C.2201743**

Amount of Each Receipt this Period

1033.06

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

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

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

55000.00

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

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

FOR LINE NUMBER: PAGE 33 OF 198

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WALKER, JAMES, , ,**

Mailing Address 111 INWOOD RD.

City  
LAREDO

State  
TX

Zip Code  
78045-2324

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1033.06

Date of Receipt

05 / 06 / 2026

Transaction ID : SA11A.2201744

Amount of Each Receipt this Period

1033.06

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTON

State  
VA

Zip Code  
22219-1891

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4863373.78

Date of Receipt

05 / 07 / 2026

Transaction ID : SA11C.2203734

Amount of Each Receipt this Period

5665.29

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NEUMANN, DAVID, , ,**

Mailing Address 6318 TURNER WAY

City  
DALLAS

State  
TX

Zip Code  
75230-1839

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JASPER NEUMANN CONSULTING

Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 07 / 2026

Transaction ID : SA11A.2203735

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

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

1533.06

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 OF 198

(check only one)

|                                                |                              |                              |                             |                             |                             |                             |                             |                             |
|------------------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="checked" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TOKAT, ERIC, , ,**

Mailing Address 204 BELLEVUE AVE

City  
MONTCLAIRState  
NJZip Code  
07043-1893FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CENTERVIEWOccupation (for Individual)  
PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5165.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 07 / 2026

Transaction ID : SA11A.2203736

Amount of Each Receipt this Period

5165.29

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BUCKLEY, MARJORIE, B., MS.,**

Mailing Address 11450 TURTLE BEACH RD

City  
NORTH PALM BEACHState  
FLZip Code  
33408-3343FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 08 / 2026

Transaction ID : SA11A.2205290

Amount of Each Receipt this Period

250000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CALANDRI, BRANDON, , ,**

Mailing Address PO BOX 6680

City  
LANCASTERState  
CAZip Code  
93539-6680FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CALANDRI FARMSOccupation (for Individual)  
FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 08 / 2026

Transaction ID : SA11A.2205286

Amount of Each Receipt this Period

2500.00

☐ Memo Item

CONTRIBUTION

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

257665.29

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 OF 198

(check only one)

|                                                |                              |                              |                             |
|------------------------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="checked" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13                    | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  | <input type="checkbox"/> 16 |
| <input type="checkbox"/> 17                    |                              |                              |                             |

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CALANDRI, JOHN, A., ,**

Mailing Address PO BOX 1928

City  
LANCASTERState  
CAZip Code  
93539-1928FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JOHN CALANDRI FARMS, INC.Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 08 / 2026

Transaction ID : SA11A.2205285

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COLBURN, RICHARD, W., ,**

Mailing Address 555 SKOKIE BLVD STE 555

City  
NORTHBROOKState  
ILZip Code  
60062-2854FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PAYROLL AND INSURANCE GROUPOccupation (for Individual)  
VICE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

237200.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 08 / 2026

Transaction ID : SA11A.2205289

Amount of Each Receipt this Period

237200.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CONNER, WILLIS, R., ,**

Mailing Address 3711 S MOPAC EXPY BLDG 1 SUITE 350

City  
AUSTINState  
TXZip Code  
78746-8013FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 08 / 2026

Transaction ID : SA11A.2205283

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)..... ►

240700.00

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

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

FOR LINE NUMBER: PAGE 36 OF 198

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GARDUNO, LAUREN, , ,**

Mailing Address 5834 FM 1086

City  
WINGATE

State  
TX

Zip Code  
79566-3204

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

05 / 08 / 2026

Transaction ID : SA11A.2205276

Amount of Each Receipt this Period

1000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GIUNTONI, GABRIELE, T., ,**

Mailing Address 3527 FALLS CT

City

PALMDALE

State

CA

Zip Code

93551-2586

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

MG ELECTRIC INCORPORATED

Occupation (for Individual)

PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

05 / 08 / 2026

Transaction ID : SA11A.2205275

Amount of Each Receipt this Period

2500.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GOODSON, BRIAN, K., ,**

Mailing Address 2745 COUNTY ROAD 114

City

LLANO

State

TX

Zip Code

78643-2674

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

05 / 08 / 2026

Transaction ID : SA11A.2205281

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 3X)** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 37 OF 198

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAVENS, JOHN, P., ,**

Mailing Address 2960 LAZY LANE BLVD

City  
HOUSTON

State  
TX

Zip Code  
77019-1302

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SEI

Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 08 / 2026

Transaction ID : SA11A.2205284

Amount of Each Receipt this Period

25000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KALIKOW, PETER, S., ,**

Mailing Address 101 PARK AVENUE 25TH FLOOR

City  
NEW YORK

State  
NY

Zip Code  
10178-0002

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
H.J. KALIKOW CO. LLC

Occupation (for Individual)  
PRESIDENT REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 08 / 2026

Transaction ID : SA11A.2205288

Amount of Each Receipt this Period

100000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KLINKE, SARA, BASHOUR, ,**

Mailing Address 6305 WHITMAR PL S

City  
SOUTH MEMPHIS

State  
TN

Zip Code  
38120-4212

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 08 / 2026

Transaction ID : SA11A.2205274

Amount of Each Receipt this Period

5000.00

☐ Memo Item

CONTRIBUTION

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

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

130000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 OF 198

(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LARY, CAMM, 'TREY', , III**

Mailing Address 1504 MARSHALL LN

City  
AUSTINState  
TXZip Code  
78703-3409FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ALLEN BOONE HUMPHRIES ROBINSON LLPOccupation (for Individual)  
PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 08 / 2026

Transaction ID : SA11A.2205278

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MARCHELI, DANNY, , ,**

Mailing Address 2207 GRAND RIVER DR

City  
RICHMONDState  
TXZip Code  
77406-1894FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CLEAR PAVEOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 08 / 2026

Transaction ID : SA11A.2205279

Amount of Each Receipt this Period

10000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OLIVER, DAVID, M., ,**

Mailing Address 3437 ELLA LEE LN

City  
HOUSTONState  
TXZip Code  
77027-4101FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 08 / 2026

Transaction ID : SA11A.2205280

Amount of Each Receipt this Period

5000.00

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

20000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 39 OF 198  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PLOWMAN, ARTHUR, GLENN, ,**

Mailing Address PO BOX 649

City  
SIMONTONState  
TXZip Code  
77476-0649FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 08 / 2026

Transaction ID : SA11A.2205282

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROBINSON, STEPHEN, M., ,**

Mailing Address 3140 HARVARD AVE APT 608

City  
DALLASState  
TXZip Code  
75205-3420FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 08 / 2026

Transaction ID : SA11A.2205277

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROBOSON, GWENDOLYN, M., ,**

Mailing Address 233 CLARKE AVE

City  
PALM BEACHState  
FLZip Code  
33480-6124FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 08 / 2026

Transaction ID : SA11A.2205291

Amount of Each Receipt this Period

7000.00

☐ Memo Item  
CONTRIBUTION

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

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

17000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 40 OF 198  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SYLVESTER, MICHAEL, S., ,**

Mailing Address 400 BEACH RD APT 201

City  
VERO BEACHState  
FLZip Code  
32963-3257FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 08 / 2026

Transaction ID : SA11A.2205272

Amount of Each Receipt this Period

7000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WEBB, PHILLIP, M., ,**

Mailing Address PO BOX 35

City  
HEFLINState  
ALZip Code  
36264-0035FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WEBB CONCRETEOccupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 08 / 2026

Transaction ID : SA11A.2205273

Amount of Each Receipt this Period

10000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ALLEN BOONE HUMPHRIES ROBINSON LLP**

Mailing Address 3200 SOUTHWEST FRWY, SUITE 2600

City  
HOUSTONState  
TXZip Code  
77027-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

35000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 08 / 2026

Transaction ID : SA11A.2205271

Amount of Each Receipt this Period

35000.00

☐ Memo Item  
CONTRIBUTION

ATTRIBUTION TO PARTNERS REQUESTED

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

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

52000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 OF 198

(check only one)

|                                         |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13             | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  | <input type="checkbox"/> 16 |
| <input type="checkbox"/> 17             |                              |                              |                             |

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.**C**

C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4863373.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 11 / 2026

Transaction ID : SA11C.2214943

Amount of Each Receipt this Period

78500.00

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DEASON, DOUG, , ,**

Mailing Address 10134 WALLER DRIVE

City  
DALLASState  
TXZip Code  
75229-6611FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DEASON CAPITAL SERVICESOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 11 / 2026

Transaction ID : SA11A.2214945

Amount of Each Receipt this Period

3500.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GALTNEY, WILLIAM, , ,**

Mailing Address 2229 SAN FELIPE ST, STE 1200

City  
HOUSTONState  
TXZip Code  
77019-5672FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
GALTNEY GROUPOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 11 / 2026

Transaction ID : SA11A.2214946

Amount of Each Receipt this Period

50000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

53500.00

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

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

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

FOR LINE NUMBER: PAGE 42 OF 198

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRZEBINSKI, DAVID, ,**

Mailing Address 5204 VALERIE

City  
BELLAIRE

State  
TX

Zip Code  
77401-4827

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KIRBY CORPORATION

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

05 / 11 / 2026

Transaction ID : SA11A.2214944

Amount of Each Receipt this Period

25000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROBERTSON, CORBIN, J., , JR.**

Mailing Address 1415 LOUISIANA ST, STE 2400

City  
HOUSTON

State  
TX

Zip Code  
77002-7361

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
QUINTANA MINERALS CORP

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

05 / 12 / 2026

Transaction ID : SA11A.2216844

Amount of Each Receipt this Period

25000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTON

State  
VA

Zip Code  
22219-1891

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

4863373.78

Date of Receipt

05 / 12 / 2026

Transaction ID : SA11C.2216399

Amount of Each Receipt this Period

1000.00

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

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

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

50000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 OF 198

(check only one)

|                                                |                              |                              |                             |                             |                             |                             |                             |                             |
|------------------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="checked" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TOWER, JEANNE, , ,**

Mailing Address 4242 ARMSTRONG PARKWAY

City  
DALLASState  
TXZip Code  
75205-3716FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 12 / 2026

Transaction ID : SA11A.2216400

Amount of Each Receipt this Period

1000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CHILDERS, D., BRAD, MR.,**

Mailing Address 3302 TANGLEY RD

City  
HOUSTONState  
TXZip Code  
77005-2246FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ARCHROCKOccupation (for Individual)  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 13 / 2026

Transaction ID : SA11A.2233989

Amount of Each Receipt this Period

100000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MILLER, LORI, A., ,**

Mailing Address 3950 LAUREL CANYON BLVD UNIT 1969

City  
STUDIO CITYState  
CAZip Code  
91614-7065FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 13 / 2026

Transaction ID : SA11A.2233988

Amount of Each Receipt this Period

25000.00

☐ Memo Item

CONTRIBUTION

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

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

126000.00

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

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

FOR LINE NUMBER: PAGE 44 OF 198

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PAILET, KEVIN, , ,**

Mailing Address 5560 CELESTIAL RD

City  
DALLAS

State  
TX

Zip Code  
75254-7612

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MARSH MCLENNAN AGENCY

Occupation (for Individual)  
INSURANCE EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

05 / 13 / 2026

**Transaction ID : SA11A.2216848**

Amount of Each Receipt this Period

2000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTON

State  
VA

Zip Code  
22219-1891

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4863373.78

Date of Receipt

05 / 14 / 2026

**Transaction ID : SA11C.2220017**

Amount of Each Receipt this Period

50661.16

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FOOTE, NATHANIEL, , ,**

Mailing Address 8905 WINDHAVEN DR.

City  
PARKER

State  
CO

Zip Code  
80134-2775

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TEXAS INFRASTRUCTURE HOLDINGS, LLC

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

20661.16

Date of Receipt

05 / 14 / 2026

**Transaction ID : SA11A.2220020**

Amount of Each Receipt this Period

20661.16

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

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

22661.16

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

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

FOR LINE NUMBER: PAGE 45 OF 198

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FULLER, BRIAN S., ,**

Mailing Address POB 96

City  
HILLSBORO

State  
OR

Zip Code  
97123-0096

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
EB5 UNITED

Occupation (for Individual)  
REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 14 / 2026

**Transaction ID : SA11A.2220019**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STEDEM, BRADFORD, ,**

Mailing Address 11 CALLE TAFT, PH-3

City  
SAN JUAN

State  
PR

Zip Code  
00911-1207

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
EB5 UNITED, LLC

Occupation (for Individual)  
REAL ESTATE DEVELOPMENT AND

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 14 / 2026

**Transaction ID : SA11A.2220018**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HERMANN, KARIN, ,**

Mailing Address 13123 EAST EMERALD COAST PARKWAY  
#158

City  
INLET BEACH

State  
FL

Zip Code  
32461-9604

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BRIGHTNIGHT

Occupation (for Individual)  
ADVISOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 15 / 2026

**Transaction ID : SA11A.2234004**

Amount of Each Receipt this Period

100000.00

☐ Memo Item

CONTRIBUTION

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

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

130000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 46 OF 198  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LOCKTON, JOHN, S., ,**

Mailing Address 4747 SOUTH FRANKLIN STREET

City  
ENGLEWOODState  
COZip Code  
80113-5940FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 15 / 2026

Transaction ID : SA11A.2234003

Amount of Each Receipt this Period

50000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOULWARE, DOUGLAS, B., MR.,**

Mailing Address 6404 WILLIAMS PKWY

City  
DALLASState  
TXZip Code  
75205-1717FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PRIORITY MANAGEMENTOccupation (for Individual)  
NURSING HOME OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

35000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 21 / 2026

Transaction ID : SA11A.2233993

Amount of Each Receipt this Period

35000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOULWARE, STEVEN, , MR.,**

Mailing Address 6420 WILLIAMS PKWY

City  
DALLASState  
TXZip Code  
75205-1717FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PROGRESSIVE REHAB SOLUTIONS LLCOccupation (for Individual)  
PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 21 / 2026

Transaction ID : SA11A.2233994

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
CONTRIBUTION

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

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

100000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 47 OF 198

(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROOKSHIRE, BRITTON, P., ,**

Mailing Address 4005 NORMANDY AVE

City  
DALLASState  
TXZip Code  
75205-1750FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 21 / 2026

Transaction ID : SA11A.2234090

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROOKSHIRE, SUNNI, F., ,**

Mailing Address 4005 NORMANDY AVE

City  
DALLASState  
TXZip Code  
75205-1750FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 21 / 2026

Transaction ID : SA11A.2234085

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COOK, JOHN, R., , JR.**

Mailing Address 2009 BROOKMANOR DR SE

City  
DECATURState  
ALZip Code  
35601-6601FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
COOKS PEST CONTROLOccupation (for Individual)  
CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 21 / 2026

Transaction ID : SA11A.2234086

Amount of Each Receipt this Period

10000.00

☐ Memo Item  
CONTRIBUTION

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

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

12000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 48 OF 198

(check only one)

|                                                |                              |                              |                             |                             |                             |                             |                             |                             |
|------------------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="checked" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COOK, LYN, STRIPLIN, ,**

Mailing Address 2009 BROOKMANOR DR S E

City  
DECATURState  
ALZip Code  
35601-6601FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
COOK'S PEST CONTROL, INC.Occupation (for Individual)  
CO-OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 21 / 2026

Transaction ID : SA11A.2234089

Amount of Each Receipt this Period

10000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COTTON, STEVEN, J., ,**

Mailing Address 10909 CANDLELIGHT LN

City  
DALLASState  
TXZip Code  
75229-3952FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYEDOccupation (for Individual)  
FINANCIAL PLANNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 21 / 2026

Transaction ID : SA11A.2233992

Amount of Each Receipt this Period

2000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FOOTE, MAX, E., ,**

Mailing Address PO BOX 1208

City  
MANDEVILLEState  
LAZip Code  
70470-1208FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MAX FOOTE CONSTRUCTION COOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 21 / 2026

Transaction ID : SA11A.2233998

Amount of Each Receipt this Period

50000.00

☐ Memo Item  
CONTRIBUTION

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

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

62000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 OF 198

(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GOLDBERG, KEN, , ,**

Mailing Address 4 ROBLEDO DR

City  
DALLASState  
TXZip Code  
75230-3059FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 21 / 2026

Transaction ID : SA11A.2233991

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GONSOLIN, AL, A., MR.,**

Mailing Address P.O. BOX 16757

City  
SUGAR LANDState  
TXZip Code  
77496-6757FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GONSOLIN ENTERPRISES, INC.Occupation (for Individual)  
C.E.O.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 21 / 2026

Transaction ID : SA11A.2234080

Amount of Each Receipt this Period

250000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GULLQUIST, HERBERT, W., ,**

Mailing Address 530 COCONUT PALM RD

City  
VERO BEACHState  
FLZip Code  
32963-3711FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

75000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 21 / 2026

Transaction ID : SA11A.2234078

Amount of Each Receipt this Period

25000.00

☐ Memo Item  
CONTRIBUTION

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

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

280000.00

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

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

FOR LINE NUMBER: PAGE 50 OF 198

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HANCE, KENT, , ,**

Mailing Address P.O. BOX 4226

City  
LUBBOCK

State  
TX

Zip Code  
79409-0003

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HANCE SCARBOROUGH, LLP

Occupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

MM / DD / YYYY  
05 / 21 / 2026

Transaction ID : SA11A.2234082

Amount of Each Receipt this Period

2000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HESS, ALISA, J., ,**

Mailing Address INFO REQUESTED

City  
INFO REQUESTED

State  
XX

Zip Code  
99999-

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
05 / 21 / 2026

Transaction ID : SA11A.2233996

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HUDDLESTON, BROCK, , ,**

Mailing Address 101 QUARRY PARK CV

City  
LIBERTY HILL

State  
TX

Zip Code  
78642-4029

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TX COMMISSION ON ENVIRONMENTAL QUALITY

Occupation (for Individual)  
CONTROL SPECIALIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY  
05 / 21 / 2026

Transaction ID : SA11A.2234076

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)..... ►

3500.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 51 OF 198

(check only one)

|                                                |                              |                              |                             |                             |                             |                             |                             |                             |
|------------------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="checked" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HUNT, RAY, L., ,**

Mailing Address 1900 N AKARD ST

City  
DALLASState  
TXZip Code  
75201-2729FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HUNT CONSOLIDATED, INC.Occupation (for Individual)  
CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 21 / 2026

Transaction ID : SA11A.2234001

Amount of Each Receipt this Period

50000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MULLIQI, GENC, , ,**

Mailing Address 2601 IDLEWOOD DR

City  
WYLIEState  
TXZip Code  
75098-8786FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 21 / 2026

Transaction ID : SA11A.2233997

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PENLAND, JOE, EDWARD, , SR.**

Mailing Address 6550 TRAM ROAD

City  
BEAUMONTState  
TXZip Code  
77713-8703FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
QUALITY MAT COMPANYOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

200000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 21 / 2026

Transaction ID : SA11A.2233999

Amount of Each Receipt this Period

100000.00

☐ Memo Item  
CONTRIBUTION

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

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

151000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 52 OF 198  
(check only one)

|                                         |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13             | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  | <input type="checkbox"/> 16 |
| <input type="checkbox"/> 17             |                              |                              |                             |

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROGERS, ALEXIA, C., ,**

Mailing Address 3976 CLUB DR. NE

City  
ATLANTAState  
GAZip Code  
30319-1112FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 21 / 2026

Transaction ID : SA11A.2234087

Amount of Each Receipt this Period

50000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROGERS, LIN, R., ,**

Mailing Address 3976 CLUB DR. NE

City  
ATLANTAState  
GAZip Code  
30319-1112FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LIN R ROGERS ELECTRICALOccupation (for Individual)  
CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 21 / 2026

Transaction ID : SA11A.2234091

Amount of Each Receipt this Period

50000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RUSHITI, GEZIM, , ,**

Mailing Address 15331 VIBURNUM ROAD

City  
FRISCOState  
TXZip Code  
75035-1095FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STARWOOD CAFEOccupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 21 / 2026

Transaction ID : SA11A.2233995

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)..... ►

101000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 OF 198

(check only one)

|                                                |                              |                              |                             |                             |                             |                             |                             |                             |
|------------------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="checked" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SAROFIM, CHRISTOPHER, B., ,**

Mailing Address 2001 KIRBY DR. STE 808

City  
HOUSTONState  
TXZip Code  
77019-6033FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
FAYEZ SAROFIM & CO.Occupation (for Individual)  
INVESTMENT COUNSELOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

125000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 21 / 2026

Transaction ID : SA11A.2234092

Amount of Each Receipt this Period

125000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SAROFIM, COURTNEY, L., ,**

Mailing Address 909 FANNIN STE 2907

City  
HOUSTONState  
TXZip Code  
77010-1024FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

125000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 21 / 2026

Transaction ID : SA11A.2234088

Amount of Each Receipt this Period

125000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SIGNORELLI, DANIEL, K., ,**

Mailing Address 1401 WOODLANDS PARKWAY

City  
THE WOODLANDSState  
TXZip Code  
77380-1122FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
THE SIGNORELLI COMPANYOccupation (for Individual)  
CEO/FOUNDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

33551.69

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 21 / 2026

Transaction ID : SA11A.2234084

Amount of Each Receipt this Period

25000.00

☐ Memo Item  
CONTRIBUTION

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

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

275000.00

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

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

FOR LINE NUMBER: PAGE 54 OF 198

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SPEARS, WILLIAM, S., DR.,**

Mailing Address 5950 SHERRY LN STE 900

City  
DALLAS

State  
TX

Zip Code  
75225-6546

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CENERGISTIC

Occupation (for Individual)  
FOUNDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

05 / 21 / 2026

Transaction ID : SA11A.2234002

Amount of Each Receipt this Period

50000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TAYLOR, CATHERINE, , ,**

Mailing Address 5600 W LOVERS LN STE 116-386

City  
DALLAS

State  
TX

Zip Code  
75209-4330

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF

Occupation (for Individual)  
FARMER-INVESTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

05 / 21 / 2026

Transaction ID : SA11A.2234000

Amount of Each Receipt this Period

25000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WOODWARD, MICHAEL, L., ,**

Mailing Address 205 SPRINGWOOD RD

City  
DRIPPING SPRINGS

State  
TX

Zip Code  
78620-4140

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HANCE SCARBOROUGH

Occupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

05 / 21 / 2026

Transaction ID : SA11A.2234081

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)..... ►

76000.00

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

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

FOR LINE NUMBER: PAGE 55 OF 198

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. BLUEJOLT ADVISORY LLC**

Mailing Address 601 E PRATT ST STE 600

City  
BALTIMORE

State  
MD

Zip Code  
21202-3118

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

05 / 21 / 2026

Transaction ID : SA11A.2233985

Amount of Each Receipt this Period

50000.00

☐ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW; ATTRIBUTION TO PARTNERS REQUESTED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. CORDISH, DAVID, S., ,**

Mailing Address 601 E PRATT ST 6TH FLR.

City  
BALTIMORE

State  
MD

Zip Code  
21202-3118

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

CORDISH

CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

05 / 21 / 2026

Transaction ID : SA11A.2332401

Amount of Each Receipt this Period

50000.00

☒ Memo Item

CONTRIBUTION

PARTNERSHIP ATTRIBUTION; ATTRIBUTION TO PARTNERS REQUESTED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTON

State  
VA

Zip Code  
22219-1891

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

4863373.78

Date of Receipt

05 / 22 / 2026

Transaction ID : SA11C.2237349

Amount of Each Receipt this Period

25000.00

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

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

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

50000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 56 OF 198

(check only one)

|                                                |                              |                              |                             |                             |                             |                             |                             |                             |
|------------------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="checked" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MILLER, JEFFREY, , ,**Mailing Address 450 ALTON ROAD  
1610City  
MIAMI BEACHState  
FLZip Code  
33139-6718FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MILLER STRATEGIES, LLCOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 22 / 2026**Transaction ID : SA11A.2237350**

Amount of Each Receipt this Period

25000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRANIERI, ROBERT, , ,**

Mailing Address 250 VESEY STREET

City  
NEW YORKState  
NYZip Code  
10281-1052FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
JANE STREETOccupation (for Individual)  
BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

132900.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 29 / 2026**Transaction ID : SA11A.2258381**

Amount of Each Receipt this Period

82900.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PAULSON, JOHN, A., ,**

Mailing Address 205 WORTH AVE

City  
PALM BEACHState  
FLZip Code  
33480-4606FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PAULSON CAPITAL INC.Occupation (for Individual)  
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

891200.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 02 / 2026**Transaction ID : SA11A.2266283**

Amount of Each Receipt this Period

891200.00

☐ Memo Item

CONTRIBUTION

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

999100.00

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

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

FOR LINE NUMBER: PAGE 57 OF 198

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTON

State  
VA

Zip Code  
22219-1891

FEC ID number of contributing  
federal political committee.

**C** C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4863373.78

Date of Receipt

**06** / **02** / **2026**

**Transaction ID : SA11C.2258387**

Amount of Each Receipt this Period

500000.00

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. DUCHOSSOIS, CRAIG, , ,**

Mailing Address 444 WEST LAKE STREET

City  
CHICAGO

State  
IL

Zip Code  
60606-0010

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Occupation (for Individual)

DUCHOSSOIS CAPITAL MANAGEMENT

CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

434100.00

Date of Receipt

**06** / **02** / **2026**

**Transaction ID : SA11A.2258389**

Amount of Each Receipt this Period

434100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. DUCHOSSOIS, JANET, , ,**

Mailing Address 444 WEST LAKE STREET

City  
CHICAGO

State  
IL

Zip Code  
60606-0010

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Occupation (for Individual)

DUCHOSSOIS CAPITAL MANAGEMENT

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

65900.00

Date of Receipt

**06** / **02** / **2026**

**Transaction ID : SA11A.2258388**

Amount of Each Receipt this Period

65900.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

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

500000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 58 OF 198

(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WADDELL, RAY, , ,**

Mailing Address 1275 VALLEY VIEW LANE

City  
IRVINGState  
TXZip Code  
75061-3609FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CEC ELECTRICAL, INC.Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

60000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 03 / 2026

Transaction ID : SA11A.2266284

Amount of Each Receipt this Period

50000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GABBAY, MAYA, , ,**

Mailing Address 10227 GAYWOOD ROAD

City  
DALLASState  
TXZip Code  
75229-6606FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

150000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 04 / 2026

Transaction ID : SA11A.2266285

Amount of Each Receipt this Period

150000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KOUM, JAN, , MR.,**Mailing Address 3130 ALPINE ROAD  
SUITE 606City  
PORTOLA VALLEYState  
CAZip Code  
94028-7549FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WHATSAPPOccupation (for Individual)  
FOUNDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

151458.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 04 / 2026

Transaction ID : SA11A.2266286

Amount of Each Receipt this Period

151458.96

☐ Memo Item

CONTRIBUTION

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

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

351458.96

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 59 OF 198

(check only one)

|                                         |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13             | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  | <input type="checkbox"/> 16 |
| <input type="checkbox"/> 17             |                              |                              |                             |

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.**C**

C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4863373.78

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 08 / 2026

Transaction ID : SA11C.2271203

Amount of Each Receipt this Period

100291.74

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BATTISTI, DAVID, , ,**

Mailing Address 115 ROSSMORE DRIVE

City  
MALVERNState  
PAZip Code  
19355-3179FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PENSKEOccupation (for Individual)  
GENERAL COUNSEL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10330.58

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 08 / 2026

Transaction ID : SA11A.2271209

Amount of Each Receipt this Period

10330.58

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CONROY, J PATRICK, , ,**

Mailing Address 790 LAKESIDE

City  
BIRMINGHAMState  
MIZip Code  
48009-1382FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PENSKEOccupation (for Individual)  
CFO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 08 / 2026

Transaction ID : SA11A.2271205

Amount of Each Receipt this Period

10000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

20330.58

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

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

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

FOR LINE NUMBER: PAGE 60 OF 198

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JACKSON, JEFF, , ,**

Mailing Address 1744 TOWNE DRIVE

City  
WEST CHESTER

State  
PA

Zip Code  
19380-6480

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PENSKE LOGISTICS

Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10330.58

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 08 / 2026

**Transaction ID : SA11A.2271206**

Amount of Each Receipt this Period

10330.58

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JANOWICZ, THOMAS, , ,**

Mailing Address 463 BLACK HORSE RD

City  
CHESTER SPRINGS

State  
PA

Zip Code  
19425-3519

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PENSKE TRUCK LEASING

Occupation (for Individual)  
CFO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10330.58

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 08 / 2026

**Transaction ID : SA11A.2271208**

Amount of Each Receipt this Period

10330.58

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KIMMELMAN, DOUGLAS, , MR.,**

Mailing Address 9001 COLLINS AVENUE

City  
SURFSIDE

State  
FL

Zip Code  
33154-3227

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ECP

Occupation (for Individual)  
INVESTMENT MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

49300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 08 / 2026

**Transaction ID : SA11A.2271204**

Amount of Each Receipt this Period

49300.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

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

69961.16

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 61 OF 198

(check only one)

|                                         |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13             | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  | <input type="checkbox"/> 16 |
| <input type="checkbox"/> 17             |                              |                              |                             |

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PENSKE, ROGER, , ,**

Mailing Address 901 ZURICH CIRCLE

City  
NEWPORT BEACHState  
CAZip Code  
92663-5539FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RP AUTOMOTIVROccupation (for Individual)  
TRANSPORTATION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 08 / 2026

Transaction ID : SA11A.2271207

Amount of Each Receipt this Period

10000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MARTIN, RUBEN, , , III**

Mailing Address P.O. DRAWER 191

City  
KILGOREState  
TXZip Code  
75663-0191FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MARTIN COMPANIESOccupation (for Individual)  
PRESIDENT/CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

107000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 09 / 2026

Transaction ID : SA11A.2272731

Amount of Each Receipt this Period

50000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

4863373.78

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 09 / 2026

Transaction ID : SA11C.2274223

Amount of Each Receipt this Period

20330.58

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

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

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

60000.00

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

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

FOR LINE NUMBER: PAGE 62 OF 198

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HARD, BRIAN, , ,**

Mailing Address 10 SEVEN SPRINGS DR

City  
READING

State  
PA

Zip Code  
19607-9766

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PENSKE TRANSPORTATION SOLUTIONS

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10330.58

Date of Receipt

MM / DD / YYYY  
06 / 09 / 2026

Transaction ID : SA11A.2274225

Amount of Each Receipt this Period

10330.58

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SEYMORE, RANDALL, , ,**

Mailing Address 2922 INTERLAKEN STREET

City  
WEST BLOOMFIELD

State  
MI

Zip Code  
48323-1817

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PENSKE

Occupation (for Individual)  
AUTO EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

MM / DD / YYYY  
06 / 09 / 2026

Transaction ID : SA11A.2274224

Amount of Each Receipt this Period

10000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTON

State  
VA

Zip Code  
22219-1891

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

4863373.78

Date of Receipt

MM / DD / YYYY  
06 / 10 / 2026

Transaction ID : SA11C.2274381

Amount of Each Receipt this Period

18780.99

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

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

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

20330.58

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

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

FOR LINE NUMBER: PAGE 63 OF 198

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CULLEN, MATT, , ,**

Mailing Address 1109 SUNNINGDALE

City  
GROSSE POINTE WOOD

State  
MI

Zip Code  
48236-1631

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JACK ENTERTAINMENT

Occupation (for Individual)  
CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5165.29

Date of Receipt

06 / 10 / 2026

Transaction ID : SA11A.2274384

Amount of Each Receipt this Period

5165.29

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JACOBS, SHELLI, , ,**

Mailing Address 602 DELAWARE DRIVE

City  
PERRYSBURG

State  
OH

Zip Code  
43551-5846

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3615.70

Date of Receipt

06 / 10 / 2026

Transaction ID : SA11A.2274382

Amount of Each Receipt this Period

3615.70

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHEARING, RICHARD, , ,**

Mailing Address 2313 POND VALLEE DRIVE

City  
OAKLAND

State  
MI

Zip Code  
48363-2946

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PENSKE AUTOMOTIVE GROUP

Occupation (for Individual)  
COO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

06 / 10 / 2026

Transaction ID : SA11A.2274383

Amount of Each Receipt this Period

10000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

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

18780.99

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

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

FOR LINE NUMBER: PAGE 64 OF 198

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTON

State  
VA

Zip Code  
22219-1891

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4863373.78

Date of Receipt

MM / DD / YYYY  
06 / 11 / 2026

Transaction ID : SA11C.2277352

Amount of Each Receipt this Period

12913.22

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. LAW, ROBERT, , ,**

Mailing Address 9864 E GRAND RIVER

City  
BRIGHTON

State  
MI

Zip Code  
48116-1963

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MRI

Occupation (for Individual)  
BUSINESS DEVELOPMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2582.64

Date of Receipt

MM / DD / YYYY  
06 / 11 / 2026

Transaction ID : SA11A.2277353

Amount of Each Receipt this Period

2582.64

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. MCCLURE, CHARLES, , ,**

Mailing Address 200 LAKE PARK DRIVE

City  
BIRMINGHAM

State  
MI

Zip Code  
48009-4606

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MICHIGAN CAPITAL ADVISORS

Occupation (for Individual)  
MANAGING PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

10330.58

Date of Receipt

MM / DD / YYYY  
06 / 11 / 2026

Transaction ID : SA11A.2277354

Amount of Each Receipt this Period

10330.58

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

12913.22

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

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 65 OF 198  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ALDAG, EDWARD, K., , JR.**

Mailing Address 3171 OVERHILL RD

City  
BIRMINGHAMState  
ALZip Code  
35223-1247FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MEDICAL PROPERTIES TRUSTOccupation (for Individual)  
BUSINESS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 12 / 2026

Transaction ID : SA11A.2277530

Amount of Each Receipt this Period

10000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BRIGGS, ANGELA, K., ,**

Mailing Address 6309 BLOOMDALE RD

City  
BLOOMDALEState  
OHZip Code  
44817-9802FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 12 / 2026

Transaction ID : SA11A.2277527

Amount of Each Receipt this Period

10000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BUI, NANCY , C., MS.,**

Mailing Address 4624 EVERGREEN ST

City  
BELLAIREState  
TXZip Code  
77401-5114FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHENIERE ENERGY INCOccupation (for Individual)  
DIRECTOR HR BUSINESS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 12 / 2026

Transaction ID : SA11A.2277517

Amount of Each Receipt this Period

3000.00

☐ Memo Item  
CONTRIBUTION

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

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

23000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 66 OF 198

(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BUTLER, WM, P., ,**

Mailing Address 100 E RIVERCENTER BLVD STE 1100

City  
COVINGTONState  
KYZip Code  
41011-1577FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CORPOREX COMPANIES INCOccupation (for Individual)  
CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 12 / 2026

Transaction ID : SA11A.2277524

Amount of Each Receipt this Period

1500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CAUTHEN, KHARY, I., ,**

Mailing Address 6691 32ND ST NW

City  
WASHINGTONState  
DCZip Code  
20015-2363FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AMERICAN PETROLEUM INSTITUTEOccupation (for Individual)  
GOVERNMENT RELATIOSN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 12 / 2026

Transaction ID : SA11A.2277521

Amount of Each Receipt this Period

4000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CULBERSON, SCOTT, , ,**

Mailing Address 9 AUTUMN CRESCENT

City  
THE WOODLANDSState  
TXZip Code  
77381-5158FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHENIERE ENERGY INCOccupation (for Individual)  
VP GAS SUPPLY AND TRADING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 12 / 2026

Transaction ID : SA11A.2277518

Amount of Each Receipt this Period

4000.00

☐ Memo Item  
CONTRIBUTION

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

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

9500.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 67 OF 198  
(check only one)

|                                                |                              |                              |                             |                             |                             |                             |                             |                             |
|------------------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="checked" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DAVIS, ZACHARY, A., ,**

Mailing Address 2245 STANMORE DRIVE

City  
HOUSTONState  
TXZip Code  
77019-5613FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHENIERE ENERGYOccupation (for Individual)  
CFO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 12 / 2026

Transaction ID : SA11A.2277522

Amount of Each Receipt this Period

4000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DOVE, MICHAEL, , ,**

Mailing Address 6902 PENNWELL DR

City  
SPRINGState  
TXZip Code  
77389-5081FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHENIEREOccupation (for Individual)  
IT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 12 / 2026

Transaction ID : SA11A.2277511

Amount of Each Receipt this Period

2000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ELLIS, CARLTON, M., ,**

Mailing Address 5517 CEDAR CREEK DR

City  
HOUSTONState  
TXZip Code  
77056-2307FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 12 / 2026

Transaction ID : SA11A.2277512

Amount of Each Receipt this Period

3000.00

☐ Memo Item  
CONTRIBUTION

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

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

9000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 68 OF 198  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FEE, ROBERT, I., ,**

Mailing Address 1313 N HUDSON ST

City  
ARLINGTONState  
VAZip Code  
22201-5015FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 12 / 2026

Transaction ID : SA11A.2277515

Amount of Each Receipt this Period

3000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FEYGIN, ANATOL, , ,**

Mailing Address 9116 CHATSWORTH DR

City  
HOUSTONState  
TXZip Code  
77024-3714FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

CHENIERE ENERGY INC

Occupation (for Individual)

SENIOR VICE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 12 / 2026

Transaction ID : SA11A.2277519

Amount of Each Receipt this Period

4000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FRIEDMAN, PHILIP, , ,**

Mailing Address 15 W 63RD ST APT 36A

City  
NEW YORKState  
NYZip Code  
10023-7178FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

C.G.S., INC.

Occupation (for Individual)

C.E.O.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

200000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 12 / 2026

Transaction ID : SA11A.2277528

Amount of Each Receipt this Period

200000.00

☐ Memo Item

CONTRIBUTION

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

207000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 69 OF 198  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FUSCO, JACK, A., ,**

Mailing Address 2727 KIRBY DR #28L

City  
HOUSTONState  
TXZip Code  
77098-1173FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHENIERE ENERGY INCOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 12 / 2026

Transaction ID : SA11A.2277523

Amount of Each Receipt this Period

15000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HEALEY, MATTHEW, T., ,**

Mailing Address 711 MAIN ST UNIT 801

City  
HOUSTONState  
TXZip Code  
77002-3323FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 12 / 2026

Transaction ID : SA11A.2277516

Amount of Each Receipt this Period

3000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HERTOGE, ROGER, , ,**

Mailing Address 1100 S FLAGLER AVE UNIT 2201

City  
WEST PALM BEACHState  
FLZip Code  
33401-6542FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 12 / 2026

Transaction ID : SA11A.2277526

Amount of Each Receipt this Period

50000.00

☐ Memo Item

CONTRIBUTION

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

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

68000.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 70 OF 198

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Grow the Majority

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. JOHNSON, TAYLOR, PRICE, ,

Mailing Address 1902 ALBANS RD

City  
HOUSTONState  
TXZip Code  
77005-1606FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 12 / 2026

Transaction ID : SA11A.2277514

Amount of Each Receipt this Period

3000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MAAS, JEROME, , ,

Mailing Address 200 SALES AVE

City  
HARRISONState  
OHZip Code  
45030-1485FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

JTM FOOD GROUP

Occupation (for Individual)

VICE PRESIDENT BUSINESS DEVEL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 12 / 2026

Transaction ID : SA11A.2277525

Amount of Each Receipt this Period

10000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MARKOWITZ, SEAN, N., ,

Mailing Address 11606 MONICA ST

City  
HOUSTONState  
TXZip Code  
77024-6406FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 12 / 2026

Transaction ID : SA11A.2277520

Amount of Each Receipt this Period

4000.00

☐ Memo Item

CONTRIBUTION

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

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

17000.00

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

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

FOR LINE NUMBER: PAGE 71 OF 198

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PENSKE, MARK, H., ,**

Mailing Address 40 WALL STREET

City  
NEW YORK

State  
NY

Zip Code  
10005-1304

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ENTREPRENEUR

Occupation (for Individual)  
ENTREPRENEUR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

06 / 12 / 2026

Transaction ID : SA11A.2290373

Amount of Each Receipt this Period

10000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SLACK, DAVID, LESTER, ,**

Mailing Address 3302 ASBURY GLEN CT

City  
SPRING

State  
TX

Zip Code  
77386-1578

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

06 / 12 / 2026

Transaction ID : SA11A.2277513

Amount of Each Receipt this Period

3000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WALSH, DAVID, H., MR.,**

Mailing Address P.O. BOX 11450

City  
JACKSON

State  
WY

Zip Code  
83002-1450

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

06 / 12 / 2026

Transaction ID : SA11A.2277529

Amount of Each Receipt this Period

100000.00

☐ Memo Item

CONTRIBUTION

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

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

113000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 72 OF 198  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.**C** C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4863373.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 12 / 2026

Transaction ID : SA11C.2278899

Amount of Each Receipt this Period

18363.64

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KELLER, BRYAN, , ,**

Mailing Address 379 MAUMEE RIVER CROSSING

City  
DEFIANCEState  
OHZip Code  
43512-1876FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

Occupation (for Individual)

KELLER LOGISTICS GROUP

CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1033.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 12 / 2026

Transaction ID : SA11A.2278902

Amount of Each Receipt this Period

1033.06

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KRUEGER, BILL, , ,**

Mailing Address 4312 W 87TH STREET

City  
OVERLAND PARKState  
KSZip Code  
66207-1911FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

Occupation (for Individual)

THE ANDERSONS

PRESIDENT CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 12 / 2026

Transaction ID : SA11A.2278903

Amount of Each Receipt this Period

1000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

2033.06

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 73 OF 198  
(check only one)

|                                                |                              |                              |                             |                             |                             |                             |                             |                             |
|------------------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="checked" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ODENDAHL, RYAN, , ,**

Mailing Address 2790 N SANCTUARY DR

City  
PORT CLINTONState  
OHZip Code  
43452-3167FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KWEST GROUPOccupation (for Individual)  
CONSTRUCTION EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 12 / 2026

Transaction ID : SA11A.2278901

Amount of Each Receipt this Period

3500.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PENSKE, GREGORY, , ,**

Mailing Address 3534 NORTH PECK ROAD

City  
EL MONTEState  
CAZip Code  
91731-3526FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PENSKE MOTOR GROUPOccupation (for Individual)  
CHAIR AND CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10330.58

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 12 / 2026

Transaction ID : SA11A.2278900

Amount of Each Receipt this Period

10330.58

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RICHTER, JAMES, , ,**

Mailing Address 2323 ZEEB RD

City  
DEXTERState  
MIZip Code  
48130-9464FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MICHIGAN RESEARCH INSTITUTEOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 12 / 2026

Transaction ID : SA11A.2278904

Amount of Each Receipt this Period

2500.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

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

16330.58

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 74 OF 198

(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.**C**

C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4863373.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 14 / 2026

Transaction ID : SA11C.2282648

Amount of Each Receipt this Period

11033.06

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KOMISAREK, PAUL, , ,**

Mailing Address 4951 TURNBRIDGE RD

City  
TOLEDOState  
OHZip Code  
43623-2769FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

Occupation (for Individual)

TKU INC

CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1033.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 14 / 2026

Transaction ID : SA11A.2282649

Amount of Each Receipt this Period

1033.06

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEE, OWEN, , ,**

Mailing Address 4070 PENINSULA DR

City  
PETOSKEYState  
MIZip Code  
49770-8010FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SUCCESS MORTGAGE PARTNERSOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 14 / 2026

Transaction ID : SA11A.2282650

Amount of Each Receipt this Period

10000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

11033.06

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

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 75 OF 198

(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HALL, BLAIR, P., ,**

Mailing Address 104 HARBOR ROAD

City  
WESTPORTState  
CTZip Code  
06880-6916FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 15 / 2026

Transaction ID : SA11A.2290372

Amount of Each Receipt this Period

10000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KURNICK, ROBERT, H., , JR**

Mailing Address 2555 SOUTH TELEGRAPH ROAD

City  
BLOOMFIELD HILLSState  
MIZip Code  
48302-0912FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

PENSKE CORP

Occupation (for Individual)

VICE CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 15 / 2026

Transaction ID : SA11A.2290371

Amount of Each Receipt this Period

10000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROBB REPORT MEDIA LLC**Mailing Address W OLYMPIC BLVD  
SUITE 1000ECity  
LOS ANGELESState  
CAZip Code  
90064-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 15 / 2026

Transaction ID : SA11A.2338114

Amount of Each Receipt this Period

10000.00

☐ Memo Item

CONTRIBUTION

CONTRIBUTION REFUNDED

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

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

30000.00

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

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

FOR LINE NUMBER: PAGE 76 OF 198

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTON

State  
VA

Zip Code  
22219-1891

FEC ID number of contributing  
federal political committee.

**C** C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4863373.78

Date of Receipt

**06** / **15** / **2026**

**Transaction ID : SA11C.2284200**

Amount of Each Receipt this Period

61500.00

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. GIBSON, JONATHAN, , ,**

Mailing Address 3645 LAHSER ROAD

City  
BLOOMFIELD HILLS

State  
MI

Zip Code  
48304-2124

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
PENSKE CORPORATION

Occupation (for Individual)  
EVP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

**06** / **15** / **2026**

**Transaction ID : SA11A.2284203**

Amount of Each Receipt this Period

10000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. LENIHAN, JEFFREY, , ,**

Mailing Address 10920, NORTHPOINT DRIVE

City  
ATHENS

State  
OH

Zip Code  
45701-8760

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

**06** / **15** / **2026**

**Transaction ID : SA11A.2284201**

Amount of Each Receipt this Period

1500.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

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

11500.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 77 OF 198  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WATSON, GEORGE, , ,**

Mailing Address 4015 BELT LINE ROAD, STE 200

City  
ADDISONState  
TXZip Code  
75001-4353FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
STEELCREEK MANAGEMENTOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 15 / 2026**Transaction ID : SA11A.2284202**

Amount of Each Receipt this Period

50000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DAVIS, ALEXANDER, JACKSON, ,**

Mailing Address 200 CRESCENT COURT STE 1175

City  
DALLASState  
TXZip Code  
75201-1829FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DISRUPTIVE TECHNOLOGIESOccupation (for Individual)  
CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

536600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 16 / 2026**Transaction ID : SA11A.2297258**

Amount of Each Receipt this Period

536600.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DAVIS, LINDSAY, , ,**

Mailing Address 200 CRESCENT COURT STE 1175

City  
DALLASState  
TXZip Code  
75201-1829FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

536600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 16 / 2026**Transaction ID : SA11A.2297257**

Amount of Each Receipt this Period

536600.00

☐ Memo Item

CONTRIBUTION

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

1123200.00

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

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

FOR LINE NUMBER: PAGE 78 OF 198

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PENSKE, ROGER, , MR.,**

Mailing Address 2555 SOUTH TELEGRAPH ROAD

City  
BLOOMFIELD

State  
MI

Zip Code  
48302-0912

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PENSKE CORPORATION

Occupation (for Individual)  
FOUNDER AND CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510000.00

Date of Receipt

06 / 16 / 2026

**Transaction ID : SA11A.2290370**

Amount of Each Receipt this Period

510000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTON

State  
VA

Zip Code  
22219-1891

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4863373.78

Date of Receipt

06 / 16 / 2026

**Transaction ID : SA11C.2287118**

Amount of Each Receipt this Period

32500.00

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ELLERHORST, GARY, , ,**

Mailing Address 6713 RIDGEFIELD CT.

City  
MASON

State  
OH

Zip Code  
45040-8984

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CROWN PLASTICSCO.

Occupation (for Individual)  
PRESIDENT CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

06 / 16 / 2026

**Transaction ID : SA11A.2287123**

Amount of Each Receipt this Period

1500.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

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

511500.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 79 OF 198

(check only one)

|                                                |                              |                              |                             |                             |                             |                             |                             |                             |
|------------------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="checked" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAUDAN, BLAKE, , ,**

Mailing Address 4420 KIMBALL CRK W

City  
SYLVANIAState  
OHZip Code  
43560-8212FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ANDEOccupation (for Individual)  
AGRICULTURE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 16 / 2026

Transaction ID : SA11A.2287119

Amount of Each Receipt this Period

1000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MILLER, JEFFREY, , ,**Mailing Address 450 ALTON ROAD  
1610City  
MIAMI BEACHState  
FLZip Code  
33139-6718FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MILLER STRATEGIES, LLCOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 16 / 2026

Transaction ID : SA11A.2287122

Amount of Each Receipt this Period

25000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WARMOTH, ADAM, , ,**

Mailing Address 2 TOWNSEND ST

City  
SAN FRANCISCOState  
CAZip Code  
94107-2046FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHARIOT DEFENSEOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 16 / 2026

Transaction ID : SA11A.2287121

Amount of Each Receipt this Period

2500.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

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

28500.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 80 OF 198

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Grow the Majority

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WICK, SCOTT, , ,

Mailing Address 436 WASHINGTON STREET

City  
TRAVERSE CITYState  
MIZip Code  
49686-2642FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HIGHSTREET INSURANCE PARTNERSOccupation (for Individual)  
INSURANCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 16 / 2026

Transaction ID : SA11A.2287120

Amount of Each Receipt this Period

2500.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CAYRE, JOE, , ,

Mailing Address 1975 EAST 3RD STREET

City

State  
NYZip Code  
11223-2946FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 17 / 2026

Transaction ID : SA11A.2302223

Amount of Each Receipt this Period

100000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WINRED

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

4863373.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 17 / 2026

Transaction ID : SA11C.2290134

Amount of Each Receipt this Period

15000.00

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

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

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

102500.00

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

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

FOR LINE NUMBER: PAGE 81 OF 198

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MENGEL, PETER, , ,**

Mailing Address 7816 RED FOX TRL

City  
MORROW

State  
OH

Zip Code  
45152-7305

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

06 / 17 / 2026

Transaction ID : SA11A.2290136

Amount of Each Receipt this Period

1500.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MIRTES, SCOTT, , ,**

Mailing Address 7301 CHIP SHOT LN

City  
WATERVILLE

State  
OH

Zip Code  
43566-9420

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MIRTES, LTD

Occupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

06 / 17 / 2026

Transaction ID : SA11A.2290137

Amount of Each Receipt this Period

3500.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WAGONER, MARK, , ,**

Mailing Address 3331 PELHAM ROAD

City  
TOLEDO

State  
OH

Zip Code  
43606-2469

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SHUMAKER, LOOP

Occupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

06 / 17 / 2026

Transaction ID : SA11A.2290135

Amount of Each Receipt this Period

10000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

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

15000.00

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

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

FOR LINE NUMBER: PAGE 82 OF 198

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTON

State  
VA

Zip Code  
22219-1891

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4863373.78

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 22 / 2026

Transaction ID : SA11C.2299148

Amount of Each Receipt this Period

40000.00

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. WEINSTEIN, ADAM, , ,**

Mailing Address 205 EAST 85TH STREET

City  
NEW YORK

State  
NY

Zip Code  
10028-3221

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NEW MOUNTAIN CAPITAL

Occupation (for Individual)  
MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

40000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 22 / 2026

Transaction ID : SA11A.2299149

Amount of Each Receipt this Period

40000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. BENNETT, EMILY, , ,**

Mailing Address 1020 PONCE DE LEON DR.

City  
FORT LAUDERDALE

State  
FL

Zip Code  
33316-1359

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BENNETT MANAGEMENT CORPORATION

Occupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 23 / 2026

Transaction ID : SA11A.2302216

Amount of Each Receipt this Period

1000.00

☐ Memo Item

CONTRIBUTION

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

41000.00

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

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

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

FOR LINE NUMBER: PAGE 83 OF 198

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BRENNAN, JIM, , ,**

Mailing Address 28523 E RIVER RD

City  
PERRYSBURG

State  
OH

Zip Code  
43551-2725

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BRENNAN EQUIPMENT SERVICES

Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

MM / DD / YYYY  
06 / 23 / 2026

Transaction ID : SA11A.2302215

Amount of Each Receipt this Period

3500.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DODD, JOHN, , ,**

Mailing Address 12920 MITCHWIN RD

City  
DALLAS

State  
TX

Zip Code  
75234-6606

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
C.F.P.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY  
06 / 23 / 2026

Transaction ID : SA11A.2302210

Amount of Each Receipt this Period

1000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FARLEY, BOBBIE, W., ,**

Mailing Address 8570 NEW ENGLAND CT

City  
CINCINNATI

State  
OH

Zip Code  
45236-2092

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
LAWYER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY  
06 / 23 / 2026

Transaction ID : SA11A.2302213

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

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

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

5000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 84 OF 198

(check only one)

|                                                |                              |                              |                             |                             |                             |                             |                             |                             |
|------------------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="checked" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HADDAD, STEVEN, S., ,**

Mailing Address 6680 VACHON CT

City  
BLOOMFIELDState  
MIZip Code  
48301-2937FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BREEZE SMOKEOccupation (for Individual)  
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 23 / 2026

Transaction ID : SA11A.2302220

Amount of Each Receipt this Period

250000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HUNT, WOODY, L., ,**

Mailing Address P.O. BOX 12667

City  
EL PASOState  
TXZip Code  
79913-0667FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HUNT COMPANIESOccupation (for Individual)  
EXECUTIVE CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 23 / 2026

Transaction ID : SA11A.2309841

Amount of Each Receipt this Period

42000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LINDNER, CARL, H., , III**

Mailing Address 301 E 4TH ST #40S

City  
CINCINNATIState  
OHZip Code  
45202-4245FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AMERICAN FINANCIAL GROUPOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 23 / 2026

Transaction ID : SA11A.2302221

Amount of Each Receipt this Period

25000.00

☐ Memo Item  
CONTRIBUTION

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

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

317000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 85 OF 198  
(check only one)

|                                                |                              |                              |                             |                             |                             |                             |                             |                             |
|------------------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="checked" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MAREK, MICHAEL, , ,**

Mailing Address 4500 DRAKE RD

City  
CINCINNATIState  
OHZip Code  
45243-4116FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
EMPIRE MARKETING STRATEGIESOccupation (for Individual)  
CFO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 23 / 2026

Transaction ID : SA11A.2302214

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MARTIN, WILLIAM, , ,**

Mailing Address 136 DEERFIELD DR.

City  
BRYANState  
OHZip Code  
43506-9368FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SPANGLER CANDY COMPANYOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 23 / 2026

Transaction ID : SA11A.2302218

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MOROUN, MATTHEW, T., ,**

Mailing Address 12225 STEPHENS RD

City  
WARRENState  
MIZip Code  
48089-2010FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CENTRAOccupation (for Individual)  
VICE CHAIRMAN AND DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

150000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 23 / 2026

Transaction ID : SA11A.2302208

Amount of Each Receipt this Period

150000.00

☐ Memo Item  
CONTRIBUTION

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

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

156000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 86 OF 198  
(check only one)

|                                                |                              |                              |                             |                             |                             |                             |                             |                             |
|------------------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="checked" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOURAD, MAJIDA, , ,**

Mailing Address 4108 PARTRIDGE

City  
TOLEDOState  
OHZip Code  
43623-3227FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 23 / 2026

Transaction ID : SA11A.2302217

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RIDI, DAN, , ,**

Mailing Address 3024 ALEX CT

City  
MAUMEEState  
OHZip Code  
43537-9290FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SAND & STORES LLCOccupation (for Individual)  
FOUNDER AND CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 23 / 2026

Transaction ID : SA11A.2302211

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCHROEDER, TONY, , ,**

Mailing Address 219 E MAIN ST

City  
OTTAWAState  
OHZip Code  
45875-1943FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYEDOccupation (for Individual)  
BUSINESSMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 23 / 2026

Transaction ID : SA11A.2302219

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)..... ►

7000.00

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

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

FOR LINE NUMBER: PAGE 87 OF 198

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SINGER, PAUL, , MR.,**

Mailing Address 320 ISLAND ROAD

City  
PALM BEACH

State  
FL

Zip Code  
33480-4751

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ELLIOT MANAGEMENT CORP

Occupation (for Individual)  
FOUNDER, PRESIDENT, CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369600.00

Date of Receipt

06 / 23 / 2026

Transaction ID : SA11A.2303584

Amount of Each Receipt this Period

77000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STEINER, EDWARD, E., ,**

Mailing Address 2624 HANDASYDE AVE

City  
CINCINNATI

State  
OH

Zip Code  
45208-2718

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KEATING MUETHING KLEKAMP

Occupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

06 / 23 / 2026

Transaction ID : SA11A.2302212

Amount of Each Receipt this Period

1500.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TRIPP, KURT, , ,**

Mailing Address 7 GRISTMILL DR

City  
STAFFORD

State  
VA

Zip Code  
22554-8505

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

06 / 23 / 2026

Transaction ID : SA11A.2302209

Amount of Each Receipt this Period

2500.00

☐ Memo Item

CONTRIBUTION

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

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

81000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 88 OF 198

(check only one)

|                                         |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13             | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  | <input type="checkbox"/> 16 |
| <input type="checkbox"/> 17             |                              |                              |                             |

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4863373.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 25 / 2026

Transaction ID : SA11C.2305188

Amount of Each Receipt this Period

85000.00

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HESS, KEVIN, , ,**

Mailing Address 11830 VIA SALERNO WAY

City  
FORT MYERSState  
FLZip Code  
33913-7504FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 25 / 2026

Transaction ID : SA11A.2305189

Amount of Each Receipt this Period

1000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WEISER, RONALD, , ,**

Mailing Address 4110 PENINSULA DR

City  
PETOSKEYState  
MIZip Code  
49770-8036FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

84000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 25 / 2026

Transaction ID : SA11A.2305190

Amount of Each Receipt this Period

84000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

85000.00

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

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 89 OF 198

(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

Grow the Majority

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CHILDS, JOHN, , ,

Mailing Address 165 SAGO PALM ROAD

City  
VERO BEACHState  
FLZip Code  
32963-3702FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
J.W. CHILDS ASSOCIATESOccupation (for Individual)  
INVESTMENTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375000.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 26    |   | 2026        |

Transaction ID : SA11A.2319829

Amount of Each Receipt this Period

150000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. COMBS, ERIC, , ,

Mailing Address 6693 MADDUX DRIVE

City  
CINCINNATIState  
OHZip Code  
45230-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DINSMORE & SHOHL LLPOccupation (for Individual)  
PARTNER/ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 26    |   | 2026        |

Transaction ID : SA11A.2309847

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CONARD, EDWARD, , ,

Mailing Address 1202 LEXINGTON AVENUE  
BOX 109City  
NEW YORKState  
NYZip Code  
10028-0015FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
INVENTOR/WRITER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

125000.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 26    |   | 2026        |

Transaction ID : SA11A.2319828

Amount of Each Receipt this Period

125000.00

☐ Memo Item  
CONTRIBUTION

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

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

275500.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 90 OF 198

(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GERDES, LINDSAY, K., ,**

Mailing Address INFO REQUESTED

City  
INFO REQUESTEDState  
XXZip Code  
99999-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2026

Transaction ID : SA11A.2309840

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HASHEMI, NOOSHEEN, , ,**

Mailing Address 1259 EL CAMINO REAL PMB 88

City  
MENLO PARKState  
CAZip Code  
94025-4208FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

JANUARY AI

Occupation (for Individual)

CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

253500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2026

Transaction ID : SA11A.2305440

Amount of Each Receipt this Period

200000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LORENTZ, JOSH, A., ,**

Mailing Address 5 GRANDIN LANE

City  
CINCINNATIState  
OHZip Code  
45206-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

DINSMORE

Occupation (for Individual)

ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2026

Transaction ID : SA11A.2309849

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

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

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

205500.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 91 OF 198

(check only one)

|                                                |                              |                              |                             |
|------------------------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="checked" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13                    | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  | <input type="checkbox"/> 16 |
| <input type="checkbox"/> 17                    |                              |                              |                             |

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MATTINGLY, MICHAEL, B., ,**

Mailing Address 107 SHILLITO PL STE 5A

City  
CINCINNATIState  
OHZip Code  
45202-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2026

Transaction ID : SA11A.2309839

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. OBERHAUS, GEOFFREY, , ,**

Mailing Address 5181 CREEK STONE CT

City  
MASONState  
OHZip Code  
45040-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

DINSMORE &amp; SHOHL LLP

Occupation (for Individual)

ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2026

Transaction ID : SA11A.2309846

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PIERCE, CHARLES, E., ,**

Mailing Address 580 WALNUT ST APT 1108

City  
CINCINNATIState  
OHZip Code  
45202-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2026

Transaction ID : SA11A.2309842

Amount of Each Receipt this Period

3000.00

☐ Memo Item  
CONTRIBUTION

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

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

4000.00

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

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

FOR LINE NUMBER: PAGE 92 OF 198

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RECKER, ANDREW, , ,**

Mailing Address 6600 GRAVES RD

City  
CINCINNATI

State  
OH

Zip Code  
45243-

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DINSMORE

Occupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 26 / 2026

Transaction ID : SA11A.2309851

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RECKER, WHITNEY, , ,**

Mailing Address 6600 GRAVES RD

City  
CINCINNATI

State  
OH

Zip Code  
45243-

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 26 / 2026

Transaction ID : SA11A.2309850

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SINGER, PAUL, , MR.,**

Mailing Address 320 ISLAND ROAD

City  
PALM BEACH

State  
FL

Zip Code  
33480-4751

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ELLIOT MANAGEMENT CORP

Occupation (for Individual)  
FOUNDER, PRESIDENT, CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

369600.00

Date of Receipt

06 / 26 / 2026

Transaction ID : SA11A.2319830

Amount of Each Receipt this Period

292600.00

☐ Memo Item

CONTRIBUTION

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

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

293100.00

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

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

FOR LINE NUMBER: PAGE 93 OF 198

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TENT, BRIAN, , ,**

Mailing Address 255 E 5TH ST

C/O DINSMORE & SHOHL LLP

City  
CINCINNATI

State  
OH

Zip Code  
45202-

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DINSMORE & SHOHL

Occupation (for Individual)  
ATTORNEY/PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
06 / 26 / 2026

Transaction ID : SA11A.2309844

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WELLS, WESLEY, , ,**

Mailing Address 235 JACK WALKER RD

City  
DAHLONEGA

State  
GA

Zip Code  
30533-

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
06 / 26 / 2026

Transaction ID : SA11A.2309838

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WOODSIDE, FRANK, C., DR.,**

Mailing Address 205 ELM AVE

City  
WYOMING

State  
OH

Zip Code  
45215-

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DINSMORE AND SHOHL LLP

Occupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

MM / DD / YYYY  
06 / 26 / 2026

Transaction ID : SA11A.2309843

Amount of Each Receipt this Period

1500.00

☐ Memo Item

CONTRIBUTION

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

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

2250.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 94 OF 198

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Grow the Majority

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WINRED

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4863373.78

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 26 / 2026

Transaction ID : SA11C.2307138

Amount of Each Receipt this Period

33000.00

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HILL, TOM, , ,

Mailing Address 1200 URBAN CENTER DRIVE

City  
BIRMINGHAMState  
ALZip Code  
35242-2545FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
VULCAN MATERIALSOccupation (for Individual)  
EXEC CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 26 / 2026

Transaction ID : SA11A.2307141

Amount of Each Receipt this Period

10000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PRUITT, RONNIE, , ,

Mailing Address 1200 URBAN CENTER DRIVE

City  
BIRMINGHAMState  
ALZip Code  
35242-2545FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
VULCAN MATERIALS COMPANYOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 26 / 2026

Transaction ID : SA11A.2307140

Amount of Each Receipt this Period

3000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

13000.00

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

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 95 OF 198

(check only one)

|                                         |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13             | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  | <input type="checkbox"/> 16 |
| <input type="checkbox"/> 17             |                              |                              |                             |

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. THORNTON, STEVEN, L., ,**

Mailing Address 307 HAZELRIG DR

City  
DECATURState  
ALZip Code  
35603-6251FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
MONTE SANO RESEARCH CORPOccupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 26 / 2026**Transaction ID : SA11A.2307139**

Amount of Each Receipt this Period

20000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.**C** C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4863373.78

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 27 / 2026**Transaction ID : SA11C.2309864**

Amount of Each Receipt this Period

5205.08

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SAYLOR, ANNIE, , ,**

Mailing Address 7202 JONES PARK SE

City  
HUNTSVILLEState  
ALZip Code  
35802-2580FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
SIMTECHOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5205.08

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 27 / 2026**Transaction ID : SA11A.2309865**

Amount of Each Receipt this Period

5205.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

25205.08

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

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

FOR LINE NUMBER: PAGE 96 OF 198

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTON

State  
VA

Zip Code  
22219-1891

FEC ID number of contributing  
federal political committee.

**C** C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4863373.78

Date of Receipt

**06** / **28** / **2026**

**Transaction ID : SA11C.2313069**

Amount of Each Receipt this Period

10000.00

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. PALOMO, OSWALDO, , ,**

Mailing Address 446 STURGES RD

City  
FAIRFIELD

State  
CT

Zip Code  
06824-2851

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
CHARTWELL STRATEGY GROUP

Occupation (for Individual)  
MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

**06** / **28** / **2026**

**Transaction ID : SA11A.2313070**

Amount of Each Receipt this Period

10000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. FARLEY, BOBBIE, W., ,**

Mailing Address 8570 NEW ENGLAND CT

City  
CINCINNATI

State  
OH

Zip Code  
45236-2092

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
LAWYER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

**06** / **29** / **2026**

**Transaction ID : SA11A.2313071**

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

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

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

10500.00

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

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

FOR LINE NUMBER: PAGE 97 OF 198

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KELSEY, JOHN, D., MR.,**

Mailing Address 74 SILL LN

City  
OLD LYME

State  
CT

Zip Code  
06371-1134

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HAMILTON POINT INVESTMENTS

Occupation (for Individual)  
INVESTMENT MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200000.00

Date of Receipt

06 / 29 / 2026

Transaction ID : SA11A.2319831

Amount of Each Receipt this Period

200000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTON

State  
VA

Zip Code  
22219-1891

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4863373.78

Date of Receipt

06 / 29 / 2026

Transaction ID : SA11C.2313197

Amount of Each Receipt this Period

100000.00

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FRIEDBERG, BARRY, , ,**

Mailing Address 134 EAST 71ST STREET

City  
NEW YORK

State  
NY

Zip Code  
10021-5011

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
EMIGRANT BANK

Occupation (for Individual)  
FINANCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

200000.00

Date of Receipt

06 / 29 / 2026

Transaction ID : SA11A.2313198

Amount of Each Receipt this Period

100000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

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

300000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 98 OF 198

(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ANDERSON, CHARLES, C., ,**

Mailing Address 202 N COURT ST

City  
FLORENCEState  
ALZip Code  
35630-4771FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
FIRST SOUTHERN BANKOccupation (for Individual)  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 30 / 2026

Transaction ID : SA11A.2315191

Amount of Each Receipt this Period

20000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BAILEY, WILLIAM, C., , JR.**

Mailing Address 2431 PINE VIEW DR. NW

City  
ARABState  
ALZip Code  
35016-4598FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
RADIANCE TECHNOLOGIESOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

120000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 30 / 2026

Transaction ID : SA11A.2317610

Amount of Each Receipt this Period

20000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BLUTH, LAWRENCE, N., ,**

Mailing Address 315 N WILLIAMSBURG RD

City  
BLOOMFIELD HILLSState  
MIZip Code  
48301-2513FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PENSKE CORPORATIONOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 30 / 2026

Transaction ID : SA11A.2317612

Amount of Each Receipt this Period

10000.00

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

50000.00

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

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

FOR LINE NUMBER: PAGE 99 OF 198

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOLOUR, DAVID, , ,**

Mailing Address 1271 N DOHENY DRIVE

City  
LOS ANGELES

State  
CA

Zip Code  
90069-1722

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AND ASSET MANAGEMENT

Occupation (for Individual)  
REAL ESTATE ASSET MANAGEMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

MM / DD / YYYY  
06 / 30 / 2026

Transaction ID : SA11A.2317780

Amount of Each Receipt this Period

3500.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BONE, AUSTIN, DANIEL, ,**

Mailing Address 735 SUNSET VILLAGE RD

City  
FRONT ROYAL

State  
VA

Zip Code  
22630-9086

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
06 / 30 / 2026

Transaction ID : SA11A.2315178

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BYRNE, KERRY, B., ,**

Mailing Address 2341 EASTHILL AVE

City  
CINCINNATI

State  
OH

Zip Code  
45208-2608

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TOTAL QUALITY LOGISTICS

Occupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

MM / DD / YYYY  
06 / 30 / 2026

Transaction ID : SA11A.2315177

Amount of Each Receipt this Period

25000.00

☐ Memo Item

CONTRIBUTION

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

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

29000.00

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

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

FOR LINE NUMBER: PAGE 100 OF 198

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COLLAZO, FRANCISCO, JOSE, ,**

Mailing Address 574 COLLAZO LOOP

City  
SCOTTSBORO

State  
AL

Zip Code  
35769-8606

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
COLSA CORPORATION

Occupation (for Individual)  
PRESIDENT AND CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2026

Transaction ID : SA11A.2315190

Amount of Each Receipt this Period

25000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CROW, HARLAN, R., ,**

Mailing Address 3819 MAPLE AVE

City  
DALLAS

State  
TX

Zip Code  
75219-3913

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CROW HOLDINGS

Occupation (for Individual)  
INVESTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2026

Transaction ID : SA11A.2317608

Amount of Each Receipt this Period

10500.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CZARNECKI, WALTER, P., ,**

Mailing Address 1886 HERON RIDGE DR

City  
BLOOMFIELD

State  
MI

Zip Code  
48302-0726

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PENSKE CORPORATION

Occupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2026

Transaction ID : SA11A.2317611

Amount of Each Receipt this Period

10000.00

☐ Memo Item

CONTRIBUTION

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

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

45500.00

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

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

FOR LINE NUMBER: PAGE 101 OF 198

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. D'ARCY, STEPHEN, R., ,**

Mailing Address 181 KENWOOD RD

City  
GROSSE POINTE FARM

State  
MI

Zip Code  
48236-3521

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

MM / DD / YYYY  
06 / 30 / 2026

Transaction ID : SA11A.2315183

Amount of Each Receipt this Period

10000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. EGGERT, PAM, , ,**

Mailing Address 2277 FAIR OAKS BOULEVARD, SUITE 23

City  
SACRAMENTO

State  
CA

Zip Code  
95825-5534

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

HOMEMAKER

Occupation (for Individual)

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

MM / DD / YYYY  
06 / 30 / 2026

Transaction ID : SA11A.2323064

Amount of Each Receipt this Period

25000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EGGERT, STEVEN, L., ,**

Mailing Address 2277 FAIR OAKS BLVD STE 230

City  
SACRAMENTO

State  
CA

Zip Code  
95825-5534

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

AMERICAN RIVER PARTNERS, LLC

Occupation (for Individual)

FOUNDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

75000.00

Date of Receipt

MM / DD / YYYY  
06 / 30 / 2026

Transaction ID : SA11A.2323065

Amount of Each Receipt this Period

25000.00

☐ Memo Item

CONTRIBUTION

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

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

60000.00

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

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

FOR LINE NUMBER: PAGE 102 OF 198

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FAIRBAIRN, PAUL, C., ,**

Mailing Address 2287 BESTER RD

City  
HARBOR SPRINGS

State  
MI

Zip Code  
49740-9401

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 30 / 2026

Transaction ID : SA11A.2315184

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FEINER, DANIEL, , ,**

Mailing Address 3063 EARLMAR DR

City  
LOS ANGELES

State  
CA

Zip Code  
90064-4631

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

FEI

Occupation (for Individual)

REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

06 / 30 / 2026

Transaction ID : SA11A.2317779

Amount of Each Receipt this Period

3500.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FLESCH, MICHAEL, , ,**

Mailing Address 714 N FOOTHILL RD

City  
BEVERLY HILLS

State  
CA

Zip Code  
90210-3405

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

SAFETY INVESTMENT CO

Occupation (for Individual)

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

06 / 30 / 2026

Transaction ID : SA11A.2317785

Amount of Each Receipt this Period

3500.00

☐ Memo Item

CONTRIBUTION

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

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

7250.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 103 OF 198  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GORDON, RAFI, , ,**

Mailing Address 2 KETCH STREET

City  
MARINA DEL REYState  
CAZip Code  
90292-5984FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CASTING NETWORKSOccupation (for Individual)  
BOARD MEMBER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2026

Transaction ID : SA11A.2317782

Amount of Each Receipt this Period

3500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HINCHMAN, ROBERT, CLAYTON, ,**

Mailing Address 4070 HIGH MOUNTAIN RD NE

City  
HUNTSVILLEState  
ALZip Code  
35811-2618FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BLACK PATCH DISTILLING CO LLCOccupation (for Individual)  
CO-OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2026

Transaction ID : SA11A.2315182

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HUIZENGA, HEIDI, , ,**

Mailing Address 44 BAYBROOK LANE

City  
OAK BROOKState  
ILZip Code  
60523-1639FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2026

Transaction ID : SA11A.2319835

Amount of Each Receipt this Period

100000.00

☐ Memo Item  
CONTRIBUTION

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

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

108500.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 104 OF 198  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KIRKPATRICK, BRENDA, S., ,**

Mailing Address 1546 RIVERFRONT RD

City  
ROGERSVILLEState  
ALZip Code  
35652-5737FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
WYLE CASOccupation (for Individual)  
CFO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2026

Transaction ID : SA11A.2315181

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KIRKPATRICK, MICHAEL, , ,**

Mailing Address 315 WYNN DR NW STE 2

City  
HUNTSVILLEState  
ALZip Code  
35805-1989FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
DESE RESEARCHOccupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2026

Transaction ID : SA11A.2315185

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KOCI, LUDVIK, , ,**

Mailing Address 4533 ARROWHEAD

City  
WEST BLOOMFIELDState  
MIZip Code  
48323-2301FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
PENSKE CORP. (PART TIME)Occupation (for Individual)  
MANAGEMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2026

Transaction ID : SA11A.2317613

Amount of Each Receipt this Period

10000.00

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

20000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 105 OF 198  
(check only one)

|                                                |                              |                              |                             |                             |                             |                             |                             |                             |
|------------------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="checked" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MANTHEI, GWENDOLYN, M., ,**

Mailing Address 1645 KILBORN DRIVE

City  
PETOSKEYState  
MIZip Code  
49770-8723FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 30 / 2026

Transaction ID : SA11A.2315180

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MARKOWITZ, VERA, , ,**

Mailing Address 715 N ARDEN DRIVE

City  
BEVERLY HILLSState  
CAZip Code  
90210-3511FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NOT EMPLOYEDOccupation (for Individual)  
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 30 / 2026

Transaction ID : SA11A.2317786

Amount of Each Receipt this Period

3500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. OAKS, KENNETH, , ,**

Mailing Address 4289 IVY POINTE BLVD

City  
CINCINNATIState  
OHZip Code  
45245-0002FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
T.Q.L.Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 30 / 2026

Transaction ID : SA11A.2315187

Amount of Each Receipt this Period

25000.00

☐ Memo Item  
CONTRIBUTION

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

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

33500.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 106 OF 198

(check only one)

|                                                |                              |                              |                             |
|------------------------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="checked" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13                    | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  | <input type="checkbox"/> 16 |
| <input type="checkbox"/> 17                    |                              |                              |                             |

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PERKINS, JERRY, F., , JR.**

Mailing Address 44 NORMAN DR

City  
MOUNTAIN BRKState  
ALZip Code  
35213-4310FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LEGACY VULCAN LLCOccupation (for Individual)  
CHIEF ADMINISTRATIVE OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2026

Transaction ID : SA11A.2315179

Amount of Each Receipt this Period

1500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. POST, RICHARD, W., MR.,**

Mailing Address 7913 BRIDGE POINT DR

City  
CINCINNATIState  
OHZip Code  
45248-1925FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2026

Transaction ID : SA11A.2317614

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SALIMPOUR, PEJMAN, , ,**

Mailing Address 15477 VENTURA BLVD., SUITE 101

City  
SHERMAN OAKSState  
CAZip Code  
91403-3047FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELFOccupation (for Individual)  
MEDICAL DOCTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2026

Transaction ID : SA11A.2317781

Amount of Each Receipt this Period

3500.00

☐ Memo Item  
CONTRIBUTION

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

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

5300.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 107 OF 198

(check only one)

|                                                |                              |                              |                             |                             |                             |                             |                             |                             |
|------------------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="checked" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SKOGEN, KRISTIAN, E., ,**

Mailing Address 3770 N BEACH ST

City  
BAY HARBORState  
MIZip Code  
49770-9058FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ADVISACARE HEALTHCARE SOLUTIONS INCOccupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2026

Transaction ID : SA11A.2315189

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SLATER, KARA, , ,**

Mailing Address 1880 CENTURY PARK EAST #1660

City  
LOS ANGELESState  
CAZip Code  
90067-1600FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELFOccupation (for Individual)  
TRAVEL AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2026

Transaction ID : SA11A.2317787

Amount of Each Receipt this Period

3500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SOLOMON, STEVEN, , ,**

Mailing Address 930 TAHOE BLVD STE 802 PMB 457

City  
INCLINE VILLAGEState  
NVZip Code  
89451-9488FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
UC BERKELEYOccupation (for Individual)  
PROFESSOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2026

Transaction ID : SA11A.2317783

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

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

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

23500.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 108 OF 198  
(check only one)

|                                                |                              |                              |                             |                             |                             |                             |                             |                             |
|------------------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="checked" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SPENCER, RICHARD, F., ,**

Mailing Address 5286 E HOME AVE

City  
FRESNOState  
CAZip Code  
93727-2103FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SPENCER ENTERPRISESOccupation (for Individual)  
DEVELOPER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

150000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2026

Transaction ID : SA11A.2323062

Amount of Each Receipt this Period

50000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SULLIVAN, VAN, , ,**

Mailing Address 106 RED BRANCH DR.

City  
MADISONState  
ALZip Code  
35758-6657FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2026

Transaction ID : SA11A.2317609

Amount of Each Receipt this Period

20000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TOWN, DANA, , ,**

Mailing Address 2705 CHANDLER CIR SE

City  
HUNTSVILLEState  
ALZip Code  
35801-1487FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKEROccupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2026

Transaction ID : SA11A.2315186

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

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

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

75000.00

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

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

FOR LINE NUMBER: PAGE 109 OF 198

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WATERS, LIZ, , ,**

Mailing Address 2550 LA MESA WAY

City  
SANTA MONICA

State  
CA

Zip Code  
90402-2305

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NOT EMPLOYED

Occupation (for Individual)  
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

MM / DD / YYYY  
06 / 30 / 2026

Transaction ID : SA11A.2317778

Amount of Each Receipt this Period

3500.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WEND, DENNIS, J., ,**

Mailing Address 1315 S WATER ST

City  
MARINE CITY

State  
MI

Zip Code  
48039-3606

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

MM / DD / YYYY  
06 / 30 / 2026

Transaction ID : SA11A.2315188

Amount of Each Receipt this Period

5000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MBLA INTERNATIONAL LLC**

Mailing Address 29-38 BAYSWATER AVENUE

City  
FAR ROCKAWAY

State  
NY

Zip Code  
11691-1730

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

MM / DD / YYYY  
06 / 30 / 2026

Transaction ID : SA11A.2319832

Amount of Each Receipt this Period

50000.00

☐ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW

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

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

58500.00

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

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

FOR LINE NUMBER: PAGE 110 OF 198

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOSKOWITZ, YECHEZKEL, , ,**

Mailing Address 746 EAST PARK COURT

City  
VALLEY STREAM

State  
NY

Zip Code  
11581-3508

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MBLA INTERNATIONAL LLC

Occupation (for Individual)  
PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2026

Transaction ID : SA11A.2319834

Amount of Each Receipt this Period

25000.00

☒ Memo Item

CONTRIBUTION

PARTNERSHIP ATTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOSKOWITZ, YEHUDAH, , ,**

Mailing Address 29-38 BAYSWATER AVENUE

City  
FAR ROCKAWAY

State  
NY

Zip Code  
11691-1730

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MBLA INTERNATIONAL LLC

Occupation (for Individual)  
PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2026

Transaction ID : SA11A.2319833

Amount of Each Receipt this Period

25000.00

☒ Memo Item

CONTRIBUTION

PARTNERSHIP ATTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

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

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

0.00

11267318.77

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

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

FOR LINE NUMBER: PAGE 111 OF 198

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. MARCHANT GOOD GOVERNMENT FUND**

Mailing Address 2126 N JOSEY LN, # 200

City  
CARROLLTON

State  
TX

Zip Code  
75006-2904

FEC ID number of contributing  
federal political committee.

**C** C00393348

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

**05 / 05 / 2026**

**Transaction ID : SA11C.2199835**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. MARCHANT GOOD GOVERNMENT FUND**

Mailing Address 2126 N JOSEY LN, # 200

City  
CARROLLTON

State  
TX

Zip Code  
75006-2904

FEC ID number of contributing  
federal political committee.

**C** C00393348

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

**05 / 08 / 2026**

**Transaction ID : SA11C.2205206**

Amount of Each Receipt this Period

- 5000.00

☐ Memo Item

CONTRIBUTION

2026 AGGREGATE; EARMARKED BY WINRED -  
CHARGED BACK

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. MAJORITY PAC**

Mailing Address P.O. BOX 2754

City  
VISTA

State  
CA

Zip Code  
92085-2754

FEC ID number of contributing  
federal political committee.

**C** C00741355

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**04 / 09 / 2026**

**Transaction ID : SA11C.2137805**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

CONTRIBUTION

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

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

5000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 112 OF 198  
(check only one)

|                              |                              |                                         |                             |
|------------------------------|------------------------------|-----------------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16 |
|                              |                              |                                         | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NEVER SURRENDER, INC. PAC**

Mailing Address P.O. BOX 509

City  
ARLINGTONState  
VAZip Code  
22216-0509FEC ID number of contributing  
federal political committee.**C** C00828541

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

665000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 13 / 2026**Transaction ID : SA11C.2172756**

Amount of Each Receipt this Period

665000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ESSENTIAL UTILITIES, INC. POLITICAL ACTION COMMITTEE**

Mailing Address 762 W LANCASTER AVE

City  
BRYN MAWRState  
PAZip Code  
19010-3402FEC ID number of contributing  
federal political committee.**C** C00340455

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 22 / 2026**Transaction ID : SA11C.2169064**

Amount of Each Receipt this Period

10000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RYAN LLC PAC**

Mailing Address 13155 NOEL RD STE 100

City  
DALLASState  
TXZip Code  
75240-5050FEC ID number of contributing  
federal political committee.**C** C00574921

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

200000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 22 / 2026**Transaction ID : SA11C.2169063**

Amount of Each Receipt this Period

200000.00

☐ Memo Item

CONTRIBUTION

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

875000.00

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

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

FOR LINE NUMBER: PAGE 113 OF 198

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. SPACE EXPLORATION TECHNOLOGIES CORP. PAC**

Mailing Address 1 ROCKET RD

City  
HAWTHORNE

State  
CA

Zip Code  
90250-6844

FEC ID number of contributing  
federal political committee.

**C** C00411116

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

102000.00

Date of Receipt

**04** / **22** / **2026**

**Transaction ID : SA11C.2169062**

Amount of Each Receipt this Period

102000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. DAY & ZIMMERMANN, INC. FEDERAL PAC**

Mailing Address 1500 SPRING GARDEN STREET

City  
PHILADELPHIA

State  
PA

Zip Code  
19130-4067

FEC ID number of contributing  
federal political committee.

**C** C00341271

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10500.00

Date of Receipt

**05** / **08** / **2026**

**Transaction ID : SA11C.2205287**

Amount of Each Receipt this Period

10500.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. SIDLEY AUSTIN LLP**

Mailing Address 787 SEVENTH AVE

City  
NEW YORK

State  
NY

Zip Code  
10019-6018

FEC ID number of contributing  
federal political committee.

**C** C00351270

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**05** / **21** / **2026**

**Transaction ID : SA11C.2233987**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

CONTRIBUTION

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

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

117500.00

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

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

FOR LINE NUMBER: PAGE 114 OF 198

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. TORCH TECHNOLOGIES INC. PAC ACCOUNT**

Mailing Address 4090 MEMORIAL PKWY SW

City  
HUNTSVILLE

State  
AL

Zip Code  
35802-1382

FEC ID number of contributing  
federal political committee.

**C** C00400424

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**05** / **21** / **2026**

**Transaction ID : SA11C.2233986**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. CHENIERE PAC**

Mailing Address 100 CUMMINGS CENTER STE 306P  
C/O RED CURVE SOLUTIONS

City  
BEVERLY

State  
MA

Zip Code  
01915-6107

FEC ID number of contributing  
federal political committee.

**C** C00430157

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

45000.00

Date of Receipt

**06** / **12** / **2026**

**Transaction ID : SA11C.2277510**

Amount of Each Receipt this Period

45000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. NATIONAL PROPANE GAS ASSOCIATION PAC**

Mailing Address 1140 CONNECTICUT AVE NW STE 1075

City  
WASHINGTON

State  
DC

Zip Code  
20036-4017

FEC ID number of contributing  
federal political committee.

**C** C00079681

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**06** / **23** / **2026**

**Transaction ID : SA11C.2302224**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

CONTRIBUTION

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

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

55000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 115 OF 198  
(check only one)

|                              |                              |                                         |                             |
|------------------------------|------------------------------|-----------------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16 |
|                              |                              |                                         | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CFD RESEARCH CORPORATION PAC**

Mailing Address 6820 MOQUIN DR NW

City  
HUNTSVILLEState  
ALZip Code  
35806-2900FEC ID number of contributing  
federal political committee.**C**

C00883645

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 30    |   | 2026        |

**Transaction ID : SA11C.2315200**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HF SINCLAIR POLITICAL ACTION COMMITTEE**

Mailing Address 2828 N HARWOOD ST STE 1300

City  
DALLASState  
TXZip Code  
75201-2174FEC ID number of contributing  
federal political committee.**C**

C00342766

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 30    |   | 2026        |

**Transaction ID : SA11C.2330771**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MAYNARD NEXSEN PAC**

Mailing Address 1901 SIXTH AVENUE NORTH 2400

REGIONS/HARBERT PLAZA

City  
BIRMINGHAMState  
ALZip Code  
35203-4604FEC ID number of contributing  
federal political committee.**C**

C00272724

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

General

Other (specify)

Aggregate Year-to-Date ▼

20000.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 30    |   | 2026        |

**Transaction ID : SA11C.2315193**

Amount of Each Receipt this Period

20000.00

☐ Memo Item

CONTRIBUTION

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

30000.00

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

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 116 OF 198  
(check only one)

|                              |                              |                                         |                             |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|-----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|-----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PAR PACIFIC HOLDINGS INC. PAC**

Mailing Address 875 TOWN &amp; COUNTRY LANE SUITE 1500

City  
HOUSTONState  
TXZip Code  
77024-2238FEC ID number of contributing  
federal political committee.**C**

C00637322

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2026

Transaction ID : SA11C.2323061

Amount of Each Receipt this Period

1000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VULCAN MATERIALS COMPANY POLITICAL ACTION COMMITTEE**

Mailing Address 1200 URBAN CENTER DR.

City  
BIRMINGHAMState  
ALZip Code  
35242-2545FEC ID number of contributing  
federal political committee.**C**

C00116020

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2026

Transaction ID : SA11C.2315194

Amount of Each Receipt this Period

10000.00

☐ Memo Item

CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WARNER NORCROSS & JUDD FEDERAL PAC**

Mailing Address 150 OTTAWA AVE NW STE 1500

City  
GRAND RAPIDSState  
MIZip Code  
49503-2832FEC ID number of contributing  
federal political committee.**C**

C00893081

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2026

Transaction ID : SA11C.2315192

Amount of Each Receipt this Period

10000.00

☐ Memo Item

CONTRIBUTION

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

21000.00

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

1103500.00

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

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

FOR LINE NUMBER: PAGE 117 OF 198

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. CONGRESSIONAL LEADERSHIP FUND-CONTRIB**

Mailing Address 1747 PENNSYLVANIA AVENUE, NW  
5TH FLOOR

City  
WASHINGTON

State  
DC

Zip Code  
20006

FEC ID number of contributing  
federal political committee.

**C** C00504530

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**04** / **24** / **2026**

**Transaction ID : SA12.10410**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

RETURN OF JF DISTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. ELECTGABEEVANS.COM**

Mailing Address PO BOX 350608

City  
WESTMINSTER

State  
CO

Zip Code  
80035

FEC ID number of contributing  
federal political committee.

**C** C00849844

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8912.79

Date of Receipt

**05** / **06** / **2026**

**Transaction ID : SA12.10502**

Amount of Each Receipt this Period

8912.79

☐ Memo Item

RETURN OF TRANSFER

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. MACKENZIE FOR CONGRESS**

Mailing Address PO BOX 747

City  
EMMAUS

State  
PA

Zip Code  
18049

FEC ID number of contributing  
federal political committee.

**C** C00846501

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

9175.78

Date of Receipt

**05** / **06** / **2026**

**Transaction ID : SA12.10503**

Amount of Each Receipt this Period

9175.78

☐ Memo Item

RETURN OF TRANSFER

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

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

23088.57

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

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

FOR LINE NUMBER: PAGE 118 OF 198

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. PATRIOTS FOR PERRY**

Mailing Address 4075 LINGLESTOWN ROAD  
PMB 119

City  
HARRISBURG

State  
PA

Zip Code  
17112

FEC ID number of contributing  
federal political committee.

**C** C00510164

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

937.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 06 / 2026

**Transaction ID : SA12.10504**

Amount of Each Receipt this Period

937.00

☐ Memo Item

RETURN OF TRANSFER

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-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)..... ►

937.00

24025.57

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

PAGE 119 OF 198

☒ 21b    ☐ 22    ☐ 23    ☐ 26    ☐ 27  
☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name (Last, First, Middle Initial)

**A. PRESTWOOD, SARAH, GRACE, ,**

Mailing Address 614 EAST CAPITOL STREET NORTHEAST

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

SEE MEMOS

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C****Transaction ID : SB21B.I10561**

Amount of Each Disbursement this Period

15751.82

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BLVD

City  
FORT WORTHState  
TXZip Code  
76155

Purpose of Disbursement

TRAVEL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C****Transaction ID : SB21B.I10641**

Amount of Each Disbursement this Period

3974.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. AVIS RENT A CAR**

Mailing Address 1908 L ST NW

City  
WASHINGTONState  
DCZip Code  
20036

Purpose of Disbursement

TRAVEL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C****Transaction ID : SB21B.I10651**

Amount of Each Disbursement this Period

1167.64

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

15751.82

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

PAGE 120 OF 198

☒ 21b    ☐ 22    ☐ 23    ☐ 26    ☐ 27  
☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name (Last, First, Middle Initial)

**A. DELTA AIR LINES INC.**

Mailing Address P.O. BOX 20706

CORPORATE HEADQUARTERS

City  
ATLANTAState  
GAZip Code  
30320

Purpose of Disbursement

TRAVEL

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C****Transaction ID : SB21B.I1065**

Amount of Each Disbursement this Period

425.95

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. FAIRFIELD INN & SUITES**

Mailing Address 346 BARONNE ST

City  
NEW ORLEANSState  
LAZip Code  
70112

Purpose of Disbursement

TRAVEL

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C****Transaction ID : SB21B.I10652**

Amount of Each Disbursement this Period

370.30

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. IDAHO RIB**

Mailing Address 320 MEMORIAL DR

City  
IDAHO FALLSState  
IDZip Code  
83402

Purpose of Disbursement

TRAVEL

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C****Transaction ID : SB21B.I1065**

Amount of Each Disbursement this Period

267.74

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

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

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

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☒ 21b    ☐ 22    ☐ 23    ☐ 26    ☐ 27  
☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name (Last, First, Middle Initial)

**A. MARRIOTT**Mailing Address CORPORATE HEADQUARTERS  
7750 WISCONSIN AVECity  
BETHESDAState  
MDZip Code  
07750

Purpose of Disbursement

TRAVEL

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C****Transaction ID : SB21B.I1065**

Amount of Each Disbursement this Period

1416.42

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. SPRINGHILL SUITES-CORPORATE**

Mailing Address 10400 FERNWOOD RD

City  
BETHESDAState  
MDZip Code  
20817

Purpose of Disbursement

TRAVEL

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C****Transaction ID : SB21B.I1065**

Amount of Each Disbursement this Period

390.94

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. ST. REGIS-NEW YORK**

Mailing Address THREE RENAISSANCE SQUARE

City  
WHITE PLAINSState  
NYZip Code  
10601

Purpose of Disbursement

TRAVEL

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C****Transaction ID : SB21B.I1065**

Amount of Each Disbursement this Period

1899.97

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

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

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

PAGE 122 OF 198

☒ 21b    ☐ 22    ☐ 23    ☐ 26    ☐ 27  
☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name (Last, First, Middle Initial)

**A. THE TAVERN-ASPEN**

Mailing Address 67 ELBERT LN

City  
SNOWMASS VILLAGEState  
COZip Code  
81615

Purpose of Disbursement

TRAVEL

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C****Transaction ID : SB21B.I1065**

Amount of Each Disbursement this Period

217.28

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. UBER TECHNOLOGIES, INC.**Mailing Address 405 HOWARD ST.  
CORPORATE HEADQUARTERSCity  
SAN FRANCISCOState  
CAZip Code  
94105

Purpose of Disbursement

TRAVEL

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C****Transaction ID : SB21B.I1065**

Amount of Each Disbursement this Period

467.50

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. UNITED AIRLINES**Mailing Address 233 S WACKER DR.  
CORPORATE HEADQUARTERSCity  
CHICAGOState  
ILZip Code  
60606

Purpose of Disbursement

TRAVEL

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C****Transaction ID : SB21B.I1065**

Amount of Each Disbursement this Period

100.00

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

0.00

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

PAGE 123 OF 198

|                                         |                              |                              |                             |                              |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a            | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Grow the Majority

Full Name (Last, First, Middle Initial)

**A. VIEWLINE RESORT SNOWMASS**

Mailing Address 100 ELBERT LANE

City  
SNOWMASS VILLAGEState  
COZip Code  
81615

Purpose of Disbursement

TRAVEL

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.I10661

Amount of Each Disbursement this Period

425.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. W HOTELS**

Mailing Address 7750 WISCONSIN AVE

City  
BETHESDAState  
MDZip Code  
20814

Purpose of Disbursement

TRAVEL

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.I10661

Amount of Each Disbursement this Period

811.38

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. WALDORF ASTORIA**

Mailing Address 301 PARK AVENUE

City  
NEW YORKState  
NYZip Code  
10022

Purpose of Disbursement

TRAVEL

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.I1066

Amount of Each Disbursement this Period

1517.90

☒ Memo Item

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

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

0.00

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

PAGE 124 OF 198

|                                         |                              |                              |                             |                              |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a            | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Grow the Majority

Full Name (Last, First, Middle Initial)

**A. WESTDRIFT MANHATTAN BEACH**

Mailing Address 1400 PARKVIEW AVE

City  
MANHATTAN BEACHState  
CAZip Code  
90266

Purpose of Disbursement

TRAVEL

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

**C** Transaction ID : SB21B.I1066

Amount of Each Disbursement this Period

1354.04

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. CONSTANGY, BILLY, , ,**Mailing Address C/O 228 SOUTH WASHINGTON STREET  
SUITE 115City  
ALEXANDRIAState  
VAZip Code  
22314

Purpose of Disbursement

SEE MEMOS

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

**C** Transaction ID : SB21B.I1055

Amount of Each Disbursement this Period

20838.38

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BLVD

City  
FORT WORTHState  
TXZip Code  
76155

Purpose of Disbursement

TRAVEL

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

**C** Transaction ID : SB21B.I1060

Amount of Each Disbursement this Period

10719.90

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

20838.38

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

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

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☒ 21b    ☐ 22    ☐ 23    ☐ 26    ☐ 27  
☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name (Last, First, Middle Initial)

**A. BOWIE HOUSE**

Mailing Address 3700 CAMP BOWIE BLVD

City  
FT WORTHState  
TXZip Code  
76107

Purpose of Disbursement

TRAVEL

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C****Transaction ID : SB21B.I1060!**

Amount of Each Disbursement this Period

520.79

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. HOUSTON GRAND HOTEL RIVER OAKS**

Mailing Address 1919 BRIAR OAKD LANE

City  
HOUSTONState  
TXZip Code  
77027

Purpose of Disbursement

TRAVEL

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C****Transaction ID : SB21B.I1061C**

Amount of Each Disbursement this Period

1860.07

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. JW ESSEX HOUSE**

Mailing Address 160 CENTRAL PARK S

City  
NEW YORKState  
NYZip Code  
10019

Purpose of Disbursement

TRAVEL

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C****Transaction ID : SB21B.I1061**

Amount of Each Disbursement this Period

1724.05

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

0.00

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

PAGE 126 OF 198

☒ 21b    ☐ 22    ☐ 23    ☐ 26    ☐ 27  
☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name (Last, First, Middle Initial)

**A. LYFT**

Date of Disbursement

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

Mailing Address 185 BERRY ST.

CORPORATE HEADQUARTERS

City  
SAN FRANCISCOState  
CAZip Code  
94107

Purpose of Disbursement

TRAVEL

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

**C** **Transaction ID : SB21B.I1061**

Amount of Each Disbursement this Period

 71.82 ☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. RESIDENCE INN BY MARRIOTT**

Date of Disbursement

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

Mailing Address 333 E ST SW

City  
WASHINGTONState  
DCZip Code  
20024

Purpose of Disbursement

TRAVEL

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

**C** **Transaction ID : SB21B.I1061**

Amount of Each Disbursement this Period

 359.78 ☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. RITZ CARLTON-DALLAS**

Date of Disbursement

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

Mailing Address 2121 MCKINNEY AVE

City  
DALLASState  
TXZip Code  
75201

Purpose of Disbursement

TRAVEL

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

**C** **Transaction ID : SB21B.I1061**

Amount of Each Disbursement this Period

 553.98 ☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 0.00

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

PAGE 127 OF 198

|                                         |                              |                              |                             |                              |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a            | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Grow the Majority

Full Name (Last, First, Middle Initial)

**A. ST. REGIS-NEW YORK**

Mailing Address THREE RENAISSANCE SQUARE

City  
WHITE PLAINSState  
NYZip Code  
10601

Purpose of Disbursement

TRAVEL

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

**C****Transaction ID : SB21B.I1061!**

Amount of Each Disbursement this Period

1353.02

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. THE PENINSULA**

Mailing Address 9882 S SANTA MONICA BLVD

City  
BEVERLY HILLSState  
CAZip Code  
90212

Purpose of Disbursement

TRAVEL

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

**C****Transaction ID : SB21B.I1061!**

Amount of Each Disbursement this Period

842.30

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. TRUMP NATIONAL DORAL**

Mailing Address 4400 NW 87TH AVE

City  
MIAMIState  
FLZip Code  
33178

Purpose of Disbursement

TRAVEL

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

**C****Transaction ID : SB21B.I1061**

Amount of Each Disbursement this Period

578.19

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

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

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

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☒ 21b    ☐ 22    ☐ 23    ☐ 26    ☐ 27  
☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name (Last, First, Middle Initial)

**A. UBER TECHNOLOGIES, INC.**Mailing Address 405 HOWARD ST.  
CORPORATE HEADQUARTERSCity  
SAN FRANCISCOState  
CAZip Code  
94105

Purpose of Disbursement

TRAVEL

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C****Transaction ID : SB21B.I1061**

Amount of Each Disbursement this Period

1891.08

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. UNITED AIRLINES**Mailing Address 233 S WACKER DR.  
CORPORATE HEADQUARTERSCity  
CHICAGOState  
ILZip Code  
60606

Purpose of Disbursement

TRAVEL

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C****Transaction ID : SB21B.I1061**

Amount of Each Disbursement this Period

239.40

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. DAVIS, CHASE, , ,**Mailing Address 228 SOUTH WASHINGTON STREET  
STE 115City  
ALEXANDRIAState  
VAZip Code  
22314

Purpose of Disbursement

SEE MEMOS

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C****Transaction ID : SB21B.I1055**

Amount of Each Disbursement this Period

3215.26

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

3215.26

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

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

PAGE 129 OF 198

|                                         |                              |                              |                             |                              |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a            | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Grow the Majority

Full Name (Last, First, Middle Initial)

**A. FAIRFIELD INN & SUITES**

Mailing Address 346 BARONNE ST

City  
NEW ORLEANSState  
LAZip Code  
70112

Purpose of Disbursement

TRAVEL

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.I1062

Amount of Each Disbursement this Period

158.70

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. HOUSTON GRAND HOTEL RIVER OAKS**

Mailing Address 1919 BRIAR OAKD LANE

City  
HOUSTONState  
TXZip Code  
77027

Purpose of Disbursement

TRAVEL

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.I1062

Amount of Each Disbursement this Period

1131.94

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. JW ESSEX HOUSE**

Mailing Address 160 CENTRAL PARK S

City  
NEW YORKState  
NYZip Code  
10019

Purpose of Disbursement

TRAVEL

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.I1062

Amount of Each Disbursement this Period

1036.45

☒ Memo Item

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

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

0.00

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

PAGE 130 OF 198

|                                         |                              |                              |                             |                              |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a            | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Grow the Majority

Full Name (Last, First, Middle Initial)

**A. RESIDENCE INN BY MARRIOTT**

Mailing Address 333 E ST SW

City  
WASHINGTONState  
DCZip Code  
20024

Purpose of Disbursement

TRAVEL

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

**C**

Transaction ID : SB21B.I1062

Amount of Each Disbursement this Period

163.56

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. RITZ CARLTON-DALLAS**

Mailing Address 2121 MCKINNEY AVE

City  
DALLASState  
TXZip Code  
75201

Purpose of Disbursement

TRAVEL

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

**C**

Transaction ID : SB21B.I1062

Amount of Each Disbursement this Period

724.61

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. HAYNES, HAYDEN, , ,**Mailing Address C/O 228 SOUTH WASHINGTON STREET  
SUITE 115City  
ALEXANDRIAState  
VAZip Code  
22314

Purpose of Disbursement

SEE MEMOS

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

**C**

Transaction ID : SB21B.I1055

Amount of Each Disbursement this Period

1341.54

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

1341.54

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

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☒ 21b    ☐ 22    ☐ 23    ☐ 26    ☐ 27  
☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name (Last, First, Middle Initial)

**A. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BLVD

City  
FORT WORTHState  
TXZip Code  
76155

Purpose of Disbursement

TRAVEL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C** **Transaction ID : SB21B.I1064**

Amount of Each Disbursement this Period

 250.30☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. MARRIOTT**Mailing Address CORPORATE HEADQUARTERS  
7750 WISCONSIN AVECity  
BETHESDAState  
MDZip Code  
07750

Purpose of Disbursement

TRAVEL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C** **Transaction ID : SB21B.I1063**

Amount of Each Disbursement this Period

 1091.24☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. CHAIN BRIDGE BANK**

Mailing Address 1445A LAUGHLIN AVE

City  
MCLEANState  
VAZip Code  
22101

Purpose of Disbursement

BANK FEES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C** **Transaction ID : SB21B.I1056**

Amount of Each Disbursement this Period

 12.00☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 12.00

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

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☒ 21b    ☐ 22    ☐ 23    ☐ 26    ☐ 27  
☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name (Last, First, Middle Initial)

**A. CHAIN BRIDGE BANK**

Mailing Address 1445A LAUGHLIN AVE

City  
MCLEANState  
VAZip Code  
22101

Purpose of Disbursement

BANK FEES

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C****Transaction ID : SB21B.I1056**

Amount of Each Disbursement this Period

485.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CMDI**

Mailing Address 1593 SPRING HILL RD

City  
VIENNAState  
VAZip Code  
22182

Purpose of Disbursement

DATA MANAGEMENT

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C****Transaction ID : SB21B.I1057**

Amount of Each Disbursement this Period

333.60

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CHAIN BRIDGE BANK**

Mailing Address 1445A LAUGHLIN AVE

City  
MCLEANState  
VAZip Code  
22101

Purpose of Disbursement

BANK FEES

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C****Transaction ID : SB21B.I1056**

Amount of Each Disbursement this Period

27.50

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

846.10

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

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|                                         |                              |                              |                             |                              |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a            | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Grow the Majority

Full Name (Last, First, Middle Initial)

**A. MULLIS, HUNTER, , ,**

Mailing Address 320 FIRST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

SEE MEMOS

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Category/  
Type

Date of Disbursement

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

FEC Identification Number

**C** Transaction ID : SB21B.I1056

Amount of Each Disbursement this Period

952.40

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BLVD

City  
FORT WORTHState  
TXZip Code  
76155

Purpose of Disbursement

TRAVEL

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Category/  
Type

Date of Disbursement

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

FEC Identification Number

**C** Transaction ID : SB21B.I10643

Amount of Each Disbursement this Period

952.40

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. CMDI**

Mailing Address 1593 SPRING HILL RD

City  
VIENNAState  
VAZip Code  
22182

Purpose of Disbursement

DATA MANAGEMENT

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Category/  
Type

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 4 |   |   | 1 | 5 |   | 2 | 0 | 2 | 6 |   |   |

FEC Identification Number

**C** Transaction ID : SB21B.I1057

Amount of Each Disbursement this Period

250.00

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

1202.40

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

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

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☒ 21b    ☐ 22    ☐ 23    ☐ 26    ☐ 27  
☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name (Last, First, Middle Initial)

**A. ALVIS, STEVE, A., ,**

Mailing Address 8827 W SAM HOUSTON PKWY N #200

City  
HOUSTONState  
TXZip Code  
77040-5383Purpose of Disbursement  
IN-KIND CONTRIBUTION

Candidate Name

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

State: District:

Date of Disbursement

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

FEC Identification Number

**C** 

Transaction ID : SB21B.22052

Amount of Each Disbursement this Period

 8551.69☐ Memo Item IN KIND: CATERING

Full Name (Last, First, Middle Initial)

**B. SIGNORELLI, DANIEL, K., ,**

Mailing Address 1401 WOODLANDS PARKWAY

City  
THE WOODLANDSState  
TXZip Code  
77380-1122Purpose of Disbursement  
IN-KIND CONTRIBUTION

Candidate Name

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

State: District:

Date of Disbursement

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

FEC Identification Number

**C** 

Transaction ID : SB21B.22052

Amount of Each Disbursement this Period

 8551.69☐ Memo Item IN KIND: CATERING

Full Name (Last, First, Middle Initial)

**C. ANEDOT**Mailing Address 1340 POYDRAS ST.  
SUITE 1770City  
NEW ORLEANSState  
LAZip Code  
70112Purpose of Disbursement  
ONLINE PROCESSING

Candidate Name

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

State: District:

Date of Disbursement

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

FEC Identification Number

**C** 

Transaction ID : SB21B.I1059

Amount of Each Disbursement this Period

 651.25☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 17754.63

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

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☒ 21b    ☐ 22    ☐ 23    ☐ 26    ☐ 27  
☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name (Last, First, Middle Initial)

**A. BYRD, MICHAEL, , ,**

Mailing Address 2112 8TH STREET NORTHWEST

City  
WASHINGTONState  
DCZip Code  
20001Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

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

State: District:

Date of Disbursement

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

FEC Identification Number

**C** Transaction ID : SB21B.I1055

Amount of Each Disbursement this Period

89900.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CHAIN BRIDGE BANK**

Mailing Address 1445A LAUGHLIN AVE

City  
MCLEANState  
VAZip Code  
22101Purpose of Disbursement  
BANK FEES

Candidate Name

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

State: District:

Date of Disbursement

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

FEC Identification Number

**C** Transaction ID : SB21B.I1057C

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. COVINGTON, COLEMAN, , ,**Mailing Address 228 SOUTH WASHINGTON STREET  
STE 115City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
SEE MEMOS

Candidate Name

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

State: District:

Date of Disbursement

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

FEC Identification Number

**C** Transaction ID : SB21B.I1055

Amount of Each Disbursement this Period

3763.93

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

93688.93

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 26    ☐ 27  
☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name (Last, First, Middle Initial)

**A. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BLVD

City  
FORT WORTHState  
TXZip Code  
76155

Purpose of Disbursement

TRAVEL

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C****Transaction ID : SB21B.I10631**

Amount of Each Disbursement this Period

613.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. AMTRAK**

Mailing Address 50 MASSACHUSETTS AVE NE

City  
WASHINGTONState  
DCZip Code  
20002

Purpose of Disbursement

TRAVEL

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C****Transaction ID : SB21B.I10631**

Amount of Each Disbursement this Period

375.50

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. HOMEWOOD SUITES NEWTOWN**

Mailing Address 110 PHEASANT RUN

City  
NEWTONState  
PAZip Code  
18940

Purpose of Disbursement

TRAVEL

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C****Transaction ID : SB21B.I10631**

Amount of Each Disbursement this Period

248.76

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

0.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 26    ☐ 27  
☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name (Last, First, Middle Initial)

**A. MARRIOTT**

Date of Disbursement

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

Mailing Address CORPORATE HEADQUARTERS  
7750 WISCONSIN AVECity  
BETHESDAState  
MDZip Code  
07750

Purpose of Disbursement

TRAVEL

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

**C****Transaction ID : SB21B.I1063**

Amount of Each Disbursement this Period

251.68

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. UBER TECHNOLOGIES, INC.**

Date of Disbursement

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

Mailing Address 405 HOWARD ST.  
CORPORATE HEADQUARTERSCity  
SAN FRANCISCOState  
CAZip Code  
94105

Purpose of Disbursement

TRAVEL

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

**C****Transaction ID : SB21B.I10634**

Amount of Each Disbursement this Period

732.46

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. UNITED AIRLINES**

Date of Disbursement

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

Mailing Address 233 S WACKER DR.  
CORPORATE HEADQUARTERSCity  
CHICAGOState  
ILZip Code  
60606

Purpose of Disbursement

TRAVEL

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

**C****Transaction ID : SB21B.I1063**

Amount of Each Disbursement this Period

1522.09

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

0.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 26    ☐ 27  
☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name (Last, First, Middle Initial)

**A. BELL, JORDAN, , ,**

Mailing Address 652 F STREET NORTHEAST

City  
WASHINGTONState  
DCZip Code  
20002Purpose of Disbursement  
TRAVEL-NO ITEM REQUIRED

Candidate Name

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

State: District:

Category/  
Type

Date of Disbursement

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

FEC Identification Number

**C****Transaction ID : SB21B.I1056**

Amount of Each Disbursement this Period

86.56

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BEACON CONSULTING**

Mailing Address 421 FIRST STREET SOUTHEAST

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

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

State: District:

Category/  
Type

Date of Disbursement

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

FEC Identification Number

**C****Transaction ID : SB21B.I1058**

Amount of Each Disbursement this Period

227410.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CHAIN BRIDGE BANK**

Mailing Address 1445A LAUGHLIN AVE

City  
MCLEANState  
VAZip Code  
22101Purpose of Disbursement  
BANK FEES

Candidate Name

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

State: District:

Category/  
Type

Date of Disbursement

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

FEC Identification Number

**C****Transaction ID : SB21B.I1057**

Amount of Each Disbursement this Period

55.00

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

227551.56

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

PAGE 139 OF 198

☒ 21b   ☐ 22   ☐ 23   ☐ 26   ☐ 27  
☐ 28a   ☐ 28b   ☐ 28c   ☐ 29   ☐ 30b

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NAME OF COMMITTEE (In Full)

Grow the Majority

Full Name (Last, First, Middle Initial)

**A. COBERLY PHOTOGRAPHY**

Mailing Address 13145 EAST FALCON MEADOW LANE

City  
CLOVISState  
CAZip Code  
93619

Purpose of Disbursement

EVENT PHOTOGRAPHY

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary   ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.I1058!

Amount of Each Disbursement this Period

1295.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. KRAMER & ASSOCIATES LLC**

Mailing Address 2201 FRANCISCO DRIVE

City

EL DORADO HILLS

State

CA

Zip Code

95762

Purpose of Disbursement

FUNDRAISING CONSULTING/CATERING

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary   ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.I1059!

Amount of Each Disbursement this Period

24152.47

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. LATE APEX DBA CRYSTAL ROWLAND & ASSOC**

Mailing Address 16769 BERNARDO CENTER DRIVE

City

SAN DIEGO

State

CA

Zip Code

92128

Purpose of Disbursement

FUNDRAISING CONSULTING

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary   ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.I1058

Amount of Each Disbursement this Period

19000.00

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

44447.47

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

PAGE 140 OF 198

☒ 21b    ☐ 22    ☐ 23    ☐ 26    ☐ 27  
☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name (Last, First, Middle Initial)

**A. LILLY & COMPANY**

Mailing Address 1005 CONGRESS AVENUE

City  
AUSTINState  
TXZip Code  
78701

Purpose of Disbursement

FUNDRAISING CONSULTING/CATERING/POSTAGE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C** **Transaction ID : SB21B.I1059**

Amount of Each Disbursement this Period

 297100.86☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. OAK CROSSING EVENT CENTER**

Mailing Address 101 GLENDA STREET

City  
WHITEHOUSEState  
TXZip Code  
75791-3206

Purpose of Disbursement

SITE RENTAL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C** **Transaction ID : SB21B.I1060**

Amount of Each Disbursement this Period

 191.33☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. STRATEGIC ADVANCE SEVICES LLC**

Mailing Address 611 PENNSYLVANIA AVENUE SOUTHEAST

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

TRAVEL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C** **Transaction ID : SB21B.I1060**

Amount of Each Disbursement this Period

 455783.42☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 753075.61

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 141 OF 198

☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27  
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name (Last, First, Middle Initial)

## **A. THE MORNING GROUP**

Mailing Address 5101 YUMA STREET NORTHWEST

City  
WASHINGTON

State  
DC

Zip Code  
20016

Purpose of Disbursement

FUNDRAISING CONSULTING/TRAVEL

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
04 / 23 / 2026

FEC Identification Number

**C**

**Transaction ID : SB21B.I1059!**

Amount of Each Disbursement this Period

319807.02

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. CHESTNUT 520 CONSULTING**

Mailing Address 7236 WEST EMILE ZOLA AVENUE

City  
PEORIA

State  
AZ

Zip Code  
85381-5507

Purpose of Disbursement

FUNDRAISING CONSULTING

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
04 / 27 / 2026

FEC Identification Number

**C**

**Transaction ID : SB21B.I10587**

Amount of Each Disbursement this Period

1451.65

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. HUCKABY DAVIS LISKER**

Mailing Address 228 SOUTH WASHINGTON STREET  
SUITE 115

City  
ALEXANDRIA

State  
VA

Zip Code  
22314

Purpose of Disbursement

COMPLIANCE CONSULTING

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
04 / 27 / 2026

FEC Identification Number

**C**

**Transaction ID : SB21B.I1057**

Amount of Each Disbursement this Period

12681.45

☐ Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ►

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

333940.12

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

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☒ 21b    ☐ 22    ☐ 23    ☐ 26    ☐ 27  
☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name (Last, First, Middle Initial)

**A. LIVELY, HALEY, , ,**

Mailing Address 1724 T STREET NORTHWEST

City  
WASHINGTONState  
DCZip Code  
20009Purpose of Disbursement  
TRAVEL-NO ITEM REQUIRED

Candidate Name

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

State: District:

Category/  
Type

Date of Disbursement

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

FEC Identification Number

**C** **Transaction ID : SB21B.I10551**

Amount of Each Disbursement this Period

 150.44☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. STEELE, GREGORY, , ,**

Mailing Address C/O 228 S WASHINGTON ST STE 115

City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
SEE MEMOS

Candidate Name

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

State: District:

Category/  
Type

Date of Disbursement

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

FEC Identification Number

**C** **Transaction ID : SB21B.I10557**

Amount of Each Disbursement this Period

 1134.80☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. AMTRAK**

Mailing Address 50 MASSACHUSETTS AVE NE

City  
WASHINGTONState  
DCZip Code  
20002Purpose of Disbursement  
TRAVEL

Candidate Name

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

State: District:

Category/  
Type

Date of Disbursement

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

FEC Identification Number

**C** **Transaction ID : SB21B.I1063**

Amount of Each Disbursement this Period

 288.00☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 1285.24

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

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|                                         |                              |                              |                             |                              |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a            | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Grow the Majority

Full Name (Last, First, Middle Initial)

**A. MARRIOTT**Mailing Address CORPORATE HEADQUARTERS  
7750 WISCONSIN AVECity  
BETHESDAState  
MDZip Code  
07750

Purpose of Disbursement

TRAVEL

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.I1063

Amount of Each Disbursement this Period

550.41

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. UBER TECHNOLOGIES, INC.**Mailing Address 405 HOWARD ST.  
CORPORATE HEADQUARTERSCity  
SAN FRANCISCOState  
CAZip Code  
94105

Purpose of Disbursement

TRAVEL

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.I1063

Amount of Each Disbursement this Period

233.82

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. CMDI**

Mailing Address 1593 SPRING HILL RD

City  
VIENNAState  
VAZip Code  
22182

Purpose of Disbursement

DATA MANAGEMENT

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   |   | 0 | 7 |   |   | 2 | 0 | 2 | 6 |   |

FEC Identification Number

C

Transaction ID : SB21B.I1058

Amount of Each Disbursement this Period

124.30

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

124.30

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

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

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☒ 21b    ☐ 22    ☐ 23    ☐ 26    ☐ 27  
☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name (Last, First, Middle Initial)

**A. LEWIS, IVAN, , ,**

Mailing Address C/O 228 SOUTH WASHINGTON STREET

City  
ALEXANDRIAState  
VAZip Code  
22314-5408

Purpose of Disbursement

SEE MEMOS

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   |   | 1 | 3 |   |   | 2 | 0 | 2 | 6 |   |   |

FEC Identification Number

**C** **Transaction ID : SB21B.I1056**

Amount of Each Disbursement this Period

 1472.40☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. UBER TECHNOLOGIES, INC.**Mailing Address 405 HOWARD ST.  
CORPORATE HEADQUARTERSCity  
SAN FRANCISCOState  
CAZip Code  
94105

Purpose of Disbursement

TRAVEL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   |   | 1 | 3 |   |   | 2 | 0 | 2 | 6 |   |   |

FEC Identification Number

**C** **Transaction ID : SB21B.I1064**

Amount of Each Disbursement this Period

 45.32☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. UNITED AIRLINES**Mailing Address 233 S WACKER DR.  
CORPORATE HEADQUARTERSCity  
CHICAGOState  
ILZip Code  
60606

Purpose of Disbursement

TRAVEL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   |   | 1 | 3 |   |   | 2 | 0 | 2 | 6 |   |   |

FEC Identification Number

**C** **Transaction ID : SB21B.I1064**

Amount of Each Disbursement this Period

 1427.08☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 1472.40

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

PAGE 145 OF 198

|                                         |                              |                              |                             |                              |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a            | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Grow the Majority

Full Name (Last, First, Middle Initial)

**A. HAYNES, HAYDEN, , ,**Mailing Address C/O 228 SOUTH WASHINGTON STREET  
SUITE 115City  
ALEXANDRIAState  
VAZip Code  
22314

Purpose of Disbursement

SEE MEMOS

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   |   | 1 | 3 |   |   | 2 | 0 | 2 | 6 |   |   |

FEC Identification Number

**C**

Transaction ID : SB21B.I1056I

Amount of Each Disbursement this Period

1777.20

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. UNITED AIRLINES**Mailing Address 233 S WACKER DR.  
CORPORATE HEADQUARTERSCity  
CHICAGOState  
ILZip Code  
60606

Purpose of Disbursement

TRAVEL

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   |   | 1 | 3 |   |   | 2 | 0 | 2 | 6 |   |   |

FEC Identification Number

**C**

Transaction ID : SB21B.I1064I

Amount of Each Disbursement this Period

1777.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. BYRD, MICHAEL, , ,**

Mailing Address 2112 8TH STREET NORTHWEST

City  
WASHINGTONState  
DCZip Code  
20001

Purpose of Disbursement

SEE MEMOS

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   |   | 1 | 3 |   |   | 2 | 0 | 2 | 6 |   |   |

FEC Identification Number

**C**

Transaction ID : SB21B.I1056I

Amount of Each Disbursement this Period

3409.20

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

5186.40

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

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

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☒ 21b    ☐ 22    ☐ 23    ☐ 26    ☐ 27  
☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name (Last, First, Middle Initial)

**A. ALASKA AIR**

Mailing Address 19300 INTERNATIONAL BLVD

City  
SEATAXState  
WAZip Code  
98188

Purpose of Disbursement

TRAVEL

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   |   | 1 | 3 |   |   | 2 | 0 | 2 | 6 |   |   |

FEC Identification Number

**C****Transaction ID : SB21B.I1064**

Amount of Each Disbursement this Period

2076.79

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. HOLIDAY INN**

Mailing Address 550 C ST SW

City  
WASHINGTONState  
DCZip Code  
20024

Purpose of Disbursement

TRAVEL

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   |   | 1 | 3 |   |   | 2 | 0 | 2 | 6 |   |   |

FEC Identification Number

**C****Transaction ID : SB21B.I1064**

Amount of Each Disbursement this Period

789.43

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. UBER TECHNOLOGIES, INC.**Mailing Address 405 HOWARD ST.  
CORPORATE HEADQUARTERSCity  
SAN FRANCISCOState  
CAZip Code  
94105

Purpose of Disbursement

TRAVEL

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   |   | 1 | 3 |   |   | 2 | 0 | 2 | 6 |   |   |

FEC Identification Number

**C****Transaction ID : SB21B.I1064**

Amount of Each Disbursement this Period

239.57

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

0.00

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

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☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name (Last, First, Middle Initial)

**A. CHAIN BRIDGE BANK**

Mailing Address 1445A LAUGHLIN AVE

City  
MCLEANState  
VAZip Code  
22101

Purpose of Disbursement

BANK FEES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   |   | 1 | 3 |   |   | 2 | 0 | 2 | 6 |   |   |

FEC Identification Number

**C****Transaction ID : SB21B.I1057**

Amount of Each Disbursement this Period

55.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. STRATEGIC ADVANCE SEVICES LLC**

Mailing Address 611 PENNSYLVANIA AVENUE SOUTHEAST

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

TRAVEL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   |   | 1 | 3 |   |   | 2 | 0 | 2 | 6 |   |   |

FEC Identification Number

**C****Transaction ID : SB21B.I1060**

Amount of Each Disbursement this Period

323179.97

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. THE LAYMONT GROUP LLC**

Mailing Address 506 EAST ROYAL FERN WAY

City  
SANTA ROSA BEACHState  
FLZip Code  
32459

Purpose of Disbursement

FUNDRAISING CONSULTING/TRAVEL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   |   | 1 | 3 |   |   | 2 | 0 | 2 | 6 |   |   |

FEC Identification Number

**C****Transaction ID : SB21B.I1059**

Amount of Each Disbursement this Period

91219.88

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

414454.85

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name (Last, First, Middle Initial)

**A. THE MORNING GROUP**

Mailing Address 5101 YUMA STREET NORTHWEST

City  
WASHINGTONState  
DCZip Code  
20016

Purpose of Disbursement

FUNDRAISING CONSULTING/TRAVEL

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   |   | 1 | 3 |   |   | 2 | 0 | 2 | 6 |   |   |

FEC Identification Number

**C****Transaction ID : SB21B.I1059I**

Amount of Each Disbursement this Period

34004.41

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CMDI**

Mailing Address 1593 SPRING HILL RD

City  
VIENNAState  
VAZip Code  
22182

Purpose of Disbursement

DATA MANAGEMENT

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C****Transaction ID : SB21B.I1058I**

Amount of Each Disbursement this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CHAIN BRIDGE BANK**

Mailing Address 1445A LAUGHLIN AVE

City  
MCLEANState  
VAZip Code  
22101

Purpose of Disbursement

BANK FEES

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C****Transaction ID : SB21B.I1057**

Amount of Each Disbursement this Period

500.00

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

34754.41

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

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|                                         |                              |                              |                             |                              |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a            | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name (Last, First, Middle Initial)

**A. CMDI**

Mailing Address 1593 SPRING HILL RD

City  
VIENNAState  
VAZip Code  
22182

Purpose of Disbursement

DATA MANAGEMENT

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

**C** **Transaction ID : SB21B.I1058**

Amount of Each Disbursement this Period

 114.40☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ANEDOT**Mailing Address 1340 POYDRAS ST.  
SUITE 1770City  
NEW ORLEANSState  
LAZip Code  
70112

Purpose of Disbursement

ONLINE PROCESSING

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 0 | 9 |   |   | 2 | 0 | 2 | 6 |   |   |

FEC Identification Number

**C** **Transaction ID : SB21B.I1060**

Amount of Each Disbursement this Period

 1775.50☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CONSTANGY, BILLY, , ,**Mailing Address C/O 228 SOUTH WASHINGTON STREET  
SUITE 115City  
ALEXANDRIAState  
VAZip Code  
22314

Purpose of Disbursement

SEE MEMOS

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

**C** **Transaction ID : SB21B.I1055**

Amount of Each Disbursement this Period

 1742.06☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 3631.96

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

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☒ 21b    ☐ 22    ☐ 23    ☐ 26    ☐ 27  
☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name (Last, First, Middle Initial)

**A. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BLVD

City  
FORT WORTHState  
TXZip Code  
76155

Purpose of Disbursement

TRAVEL

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C****Transaction ID : SB21B.I10621**

Amount of Each Disbursement this Period

388.01

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. AMTRAK**

Mailing Address 50 MASSACHUSETTS AVE NE

City  
WASHINGTONState  
DCZip Code  
20002

Purpose of Disbursement

TRAVEL

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C****Transaction ID : SB21B.I10621**

Amount of Each Disbursement this Period

231.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. HOMEWOOD SUITES NEWTOWN**

Mailing Address 110 PHEASANT RUN

City  
NEWTONState  
PAZip Code  
18940

Purpose of Disbursement

TRAVEL

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C****Transaction ID : SB21B.I1062**

Amount of Each Disbursement this Period

244.76

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

0.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name (Last, First, Middle Initial)

**A. RITZ CARLTON-DALLAS**

Mailing Address 2121 MCKINNEY AVE

City  
DALLASState  
TXZip Code  
75201

Purpose of Disbursement

TRAVEL

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C****Transaction ID : SB21B.I1062**

Amount of Each Disbursement this Period

589.43

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. UBER TECHNOLOGIES, INC.**Mailing Address 405 HOWARD ST.  
CORPORATE HEADQUARTERSCity  
SAN FRANCISCOState  
CAZip Code  
94105

Purpose of Disbursement

TRAVEL

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C****Transaction ID : SB21B.I10624**

Amount of Each Disbursement this Period

288.86

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. HAYNES, HAYDEN, , ,**Mailing Address C/O 228 SOUTH WASHINGTON STREET  
SUITE 115City  
ALEXANDRIAState  
VAZip Code  
22314

Purpose of Disbursement

SEE MEMOS

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   |   |   |   |   | 2 | 0 | 2 | 6 |   |   |

FEC Identification Number

**C****Transaction ID : SB21B.I1056**

Amount of Each Disbursement this Period

605.80

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

605.80

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name (Last, First, Middle Initial)

## **A. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BLVD

City  
FORT WORTH

State  
TX

Zip Code  
76155

Purpose of Disbursement

TRAVEL

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 11 / 2026

FEC Identification Number

**C**

**Transaction ID : SB21B.I1064**

Amount of Each Disbursement this Period

605.80

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. CHAIN BRIDGE BANK**

Mailing Address 1445A LAUGHLIN AVE

City  
MCLEAN

State  
VA

Zip Code  
22101

Purpose of Disbursement

BANK FEES

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 11 / 2026

FEC Identification Number

**C**

**Transaction ID : SB21B.I10574**

Amount of Each Disbursement this Period

52.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. KRAMER & ASSOCIATES LLC**

Mailing Address 2201 FRANCISCO DRIVE

City  
EL DORADO HILLS

State  
CA

Zip Code  
95762

Purpose of Disbursement

FUNDRAISING CONSULTING

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 11 / 2026

FEC Identification Number

**C**

**Transaction ID : SB21B.I1058**

Amount of Each Disbursement this Period

10000.00

☐ Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ►

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

10052.50

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

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☒ 21b    ☐ 22    ☐ 23    ☐ 26    ☐ 27  
☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name (Last, First, Middle Initial)

**A. LEX POLITICA PLLC**

Mailing Address PO BOX 341016

City  
AUSTINState  
TXZip Code  
78734

Purpose of Disbursement

LEGAL FEES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

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

FEC Identification Number

**C****Transaction ID : SB21B.I10591**

Amount of Each Disbursement this Period

9542.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. LILLY & COMPANY**

Mailing Address 1005 CONGRESS AVENUE

City  
AUSTINState  
TXZip Code  
78701

Purpose of Disbursement

FUNDRAISING CONSULTING/CATERING/POSTAGE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

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

FEC Identification Number

**C****Transaction ID : SB21B.I10591**

Amount of Each Disbursement this Period

123398.99

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. PROFESSONAL PRINT & MAIL INC**

Mailing Address 2818 EAST HAMILTON AVENUE

City  
FRESNOState  
CAZip Code  
93721

Purpose of Disbursement

PRINTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

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

FEC Identification Number

**C****Transaction ID : SB21B.I1060**

Amount of Each Disbursement this Period

412.50

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

133353.99

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

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☒ 21b    ☐ 22    ☐ 23    ☐ 26    ☐ 27  
☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name (Last, First, Middle Initial)

**A. STRATEGIC ADVANCE SEVICES LLC**

Mailing Address 611 PENNSYLVANIA AVENUE SOUTHEAST

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

TRAVEL

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C** Transaction ID : SB21B.I1060

Amount of Each Disbursement this Period

22715.57

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. THE CHARLES GROUP LLC**

Mailing Address 8700 WEST BRYN MAWR AVENUE

City  
CHICAGOState  
ILZip Code  
60631

Purpose of Disbursement

FUNDRAISING CONSULTING

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C** Transaction ID : SB21B.I1059C

Amount of Each Disbursement this Period

28488.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. THE CW GROUP**

Mailing Address 1152 MAE STREET

City  
HUMMELSTOWNState  
PAZip Code  
17036

Purpose of Disbursement

CATERING

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C** Transaction ID : SB21B.I1057

Amount of Each Disbursement this Period

5778.39

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

56981.96

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

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|                                         |                              |                              |                             |                              |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a            | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Grow the Majority

Full Name (Last, First, Middle Initial)

**A. THE MORNING GROUP**

Mailing Address 5101 YUMA STREET NORTHWEST

City  
WASHINGTONState  
DCZip Code  
20016

Purpose of Disbursement

FUNDRAISING CONSULTING/TRAVEL

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.I1059

Amount of Each Disbursement this Period

5278.95

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CMDI**

Mailing Address 1593 SPRING HILL RD

City  
VIENNAState  
VAZip Code  
22182

Purpose of Disbursement

DATA MANAGEMENT

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.I1058

Amount of Each Disbursement this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ANEDOT**Mailing Address 1340 POYDRAS ST.  
SUITE 1770City  
NEW ORLEANSState  
LAZip Code  
70112

Purpose of Disbursement

ONLINE PROCESSING

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.I1060

Amount of Each Disbursement this Period

6418.75

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

11947.70

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

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

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☒ 21b    ☐ 22    ☐ 23    ☐ 26    ☐ 27  
☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name (Last, First, Middle Initial)

**A. CHAIN BRIDGE BANK**

Mailing Address 1445A LAUGHLIN AVE

City  
MCLEANState  
VAZip Code  
22101

Purpose of Disbursement

BANK FEES

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C****Transaction ID : SB21B.I1057!**

Amount of Each Disbursement this Period

460.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DEMOCRACY ENGINE**

Mailing Address 2125 14TH ST NW

City  
WASHINGTONState  
DCZip Code  
20009

Purpose of Disbursement

ONLINE PROCESSING

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C****Transaction ID : SB21B.I10602**

Amount of Each Disbursement this Period

6750.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WINRED**Mailing Address 1776 WILSON BLVD  
STE 530City  
ARLINGTONState  
VAZip Code  
22209

Purpose of Disbursement

EARMARK FEES

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C****Transaction ID : SB21B.I1058**

Amount of Each Disbursement this Period

49532.65

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

56742.65

2244259.98

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

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|                              |                                        |                              |                             |                              |
|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input checked="" type="checkbox"/> 22 | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name (Last, First, Middle Initial)

**A. NRCC**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS-BLDG

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   |   | 3 | 1 |   |   | 2 | 0 | 2 | 6 |   |   |

FEC Identification Number

**C** C00075820**Transaction ID : SB22.I10768**

Amount of Each Disbursement this Period

260000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. NRCC**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   |   | 3 | 1 |   |   | 2 | 0 | 2 | 6 |   |   |

FEC Identification Number

**C** C00075820**Transaction ID : SB22.I10771**

Amount of Each Disbursement this Period

170000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. NRCC**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS-LEGAL

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   |   | 3 | 1 |   |   | 2 | 0 | 2 | 6 |   |   |

FEC Identification Number

**C** C00075820**Transaction ID : SB22.I10774**

Amount of Each Disbursement this Period

360000.00

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

790000.00

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

PAGE 158 OF 198

|                              |                                        |                              |                             |                              |
|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input checked="" type="checkbox"/> 22 | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Grow the Majority

Full Name (Last, First, Middle Initial)

**A. ALASKANS FOR NICK BEGICH**

Mailing Address PO BOX 671710

City  
CHUGIAKState  
AKZip Code  
99567

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

BEGICH, NICHOLAS, , , III

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

State: AK

District: 00

Date of Disbursement

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

FEC Identification Number

**C** C00792341**Transaction ID : SB22.I10670**

Amount of Each Disbursement this Period

57307.37

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ALASKANS FOR NICK BEGICH**

Mailing Address PO BOX 671710

City  
CHUGIAKState  
AKZip Code  
99567

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

BEGICH, NICHOLAS, , , III

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify)

State: AK

District: 00

Date of Disbursement

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

FEC Identification Number

**C** C00792341**Transaction ID : SB22.I10671**

Amount of Each Disbursement this Period

68389.90

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BRIAN FITZPATRICK FOR ALL OF US**

Mailing Address PO BOX 939

City  
LANGHORNEState  
PAZip Code  
19047

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

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

FEC Identification Number

**C** C00607416**Transaction ID : SB22.I10672**

Amount of Each Disbursement this Period

52025.20

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

177722.47

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

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

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|                              |                                        |                              |                             |                              |
|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input checked="" type="checkbox"/> 22 | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name (Last, First, Middle Initial)

**A. BRIAN FITZPATRICK FOR ALL OF US**

Mailing Address PO BOX 939

City  
LANGHORNEState  
PAZip Code  
19047

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

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

FEC Identification Number

**C** C00607416**Transaction ID : SB22.I10673**

Amount of Each Disbursement this Period

56245.96

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BRINKER HARDING FOR CONGRESS**

Mailing Address 2122 S 109TH ST.

City  
OMAHAState  
NEZip Code  
68144

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

HARDING, BRINKER, , ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NE

District: 02

Date of Disbursement

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

FEC Identification Number

**C** C00909515**Transaction ID : SB22.I10674**

Amount of Each Disbursement this Period

34212.43

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CARLOS FOR CONGRESS**

Mailing Address PO BOX 2072

City  
UNIVERSAL CITYState  
TXZip Code  
78148

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

DE LA CRUZ, CARLOS, , , JR.

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

State: TX

District: 35

Date of Disbursement

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

FEC Identification Number

**C** C00922013**Transaction ID : SB22.I10675**

Amount of Each Disbursement this Period

22374.19

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

112832.58

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

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|                              |                                        |                              |                             |                              |
|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input checked="" type="checkbox"/> 22 | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Grow the Majority

Full Name (Last, First, Middle Initial)

**A. CARRIE BUCK FOR CONGRESS**

Mailing Address 9070 IRVINE CENTER DRIVE #150

City  
IRVINEState  
CAZip Code  
92618

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

BUCK, CARRIE, . .

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NV

District: 01

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 24    |   | 2026        |

FEC Identification Number

**C** C00914804

Transaction ID : SB22.I10676

Amount of Each Disbursement this Period

31216.73

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CARRIE BUCK FOR CONGRESS**

Mailing Address 9070 IRVINE CENTER DRIVE #150

City  
IRVINEState  
CAZip Code  
92618

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

BUCK, CARRIE, . .

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify)

State: NV

District: 01

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 24    |   | 2026        |

FEC Identification Number

**C** C00914804

Transaction ID : SB22.I10677

Amount of Each Disbursement this Period

60540.29

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CISCOMANI FOR CONGRESS**

Mailing Address P.O. BOX 35103

City  
TUCSONState  
AZZip Code  
85740-5103

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

CISCOMANI, JUAN, . .

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

State: AZ

District: 06

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 24    |   | 2026        |

FEC Identification Number

**C** C00786194

Transaction ID : SB22.I10678

Amount of Each Disbursement this Period

54661.49

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

146418.51

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

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

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|                              |                                        |                              |                             |                              |
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| <input type="checkbox"/> 21b | <input checked="" type="checkbox"/> 22 | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Grow the Majority

Full Name (Last, First, Middle Initial)

**A. CISCOMANI FOR CONGRESS**

Mailing Address P.O. BOX 35103

City  
TUCSONState  
AZZip Code  
85740-5103

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

CISCOMANI, JUAN, , ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: AZ

District: 06

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 24    |   | 2026        |

FEC Identification Number

**C** C00786194**Transaction ID : SB22.I10679**

Amount of Each Disbursement this Period

54068.26

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CONROY FOR CONGRESS**Mailing Address 2692 MADISON RD  
STE N1 BOX 358City  
CINCINNATIState  
OHZip Code  
45208

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

CONROY, ERIC, , ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

State: OH

District: 01

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 24    |   | 2026        |

FEC Identification Number

**C** C00912311**Transaction ID : SB22.I10680**

Amount of Each Disbursement this Period

36780.17

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CUNNINGHAM FOR NM**

Mailing Address PO BOX 1197

City  
LAS CRUCESState  
NMZip Code  
88004

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

CUNNINGHAM, GREG, , ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NM

District: 02

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 24    |   | 2026        |

FEC Identification Number

**C** C00921791**Transaction ID : SB22.I10681**

Amount of Each Disbursement this Period

32920.67

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

123769.10

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

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

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|                              |                                        |                              |                             |                              |
|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input checked="" type="checkbox"/> 22 | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name (Last, First, Middle Initial)

**A. CUNNINGHAM FOR NM**

Mailing Address PO BOX 1197

City  
LAS CRUCESState  
NMZip Code  
88004

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

CUNNINGHAM, GREG, , ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: NM

District: 02

Category/  
Type

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
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| 0 | 6 |   |   | 2 | 4 |   |   | 2 | 0 | 2 | 6 |   |   |

FEC Identification Number

**C** C00921791**Transaction ID : SB22.I10682**

Amount of Each Disbursement this Period

27094.44

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DEREK MERRIN FOR CONGRESS**

Mailing Address PO BOX 75

City  
MONCLOVAState  
OHZip Code  
43542

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

MERRIN, DEREK, , ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

State: OH

District: 09

Category/  
Type

Date of Disbursement

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

FEC Identification Number

**C** C00909630**Transaction ID : SB22.I10683**

Amount of Each Disbursement this Period

42828.16

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DESMOND FOR CONGRESS**

Mailing Address 9070 IRVINE CENTER DRIVE SUITE 150

City  
IRVINEState  
CAZip Code  
92618

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

DESMOND, JIM, , ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

State: CA

District: 48

Category/  
Type

Date of Disbursement

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

FEC Identification Number

**C** C00895722**Transaction ID : SB22.I10684**

Amount of Each Disbursement this Period

22374.19

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

92296.79

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

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

PAGE 163 OF 198

|                              |                                        |                              |                             |                              |
|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input checked="" type="checkbox"/> 22 | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name (Last, First, Middle Initial)

**A. ELECTGABEEVANS.COM**

Mailing Address PO BOX 350608

City  
WESTMINSTERState  
COZip Code  
80035

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

EVANS, TIMOTHY, GABRIEL JOSEPH, ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

State: CO

District: 08

Date of Disbursement

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

FEC Identification Number

**C** C00849844  
**Transaction ID : SB22.I10685**

Amount of Each Disbursement this Period

54796.52

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ELECTGABEEVANS.COM**

Mailing Address PO BOX 350608

City  
WESTMINSTERState  
COZip Code  
80035

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

EVANS, TIMOTHY, GABRIEL JOSEPH, ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: CO

District: 08

Date of Disbursement

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

FEC Identification Number

**C** C00849844  
**Transaction ID : SB22.I10686**

Amount of Each Disbursement this Period

54381.35

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ELI CRANE FOR CONGRESS**

Mailing Address PO BOX 1950

City  
CORTAROState  
AZZip Code  
85652

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

CRANE, ELI, , ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

State: AZ

District: 02

Date of Disbursement

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

FEC Identification Number

**C** C00784934  
**Transaction ID : SB22.I10687**

Amount of Each Disbursement this Period

18786.00

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

127963.87

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

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|                              |                                        |                              |                             |                              |
|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input checked="" type="checkbox"/> 22 | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Grow the Majority

Full Name (Last, First, Middle Initial)

**A. ELI CRANE FOR CONGRESS**

Mailing Address PO BOX 1950

City  
CORTAROState  
AZZip Code  
85652

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

CRANE, ELI, , ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: AZ

District: 02

Date of Disbursement

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

FEC Identification Number

**C** C00784934**Transaction ID : SB22.I10688**

Amount of Each Disbursement this Period

24574.53

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ERIC FLORES FOR CONGRESS**

Mailing Address PO BOX 84

City  
SAN BENITOState  
TXZip Code  
78586

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

FLORES, ERIC, , ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

State: TX

District: 34

Date of Disbursement

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

FEC Identification Number

**C** C00912246**Transaction ID : SB22.I10689**

Amount of Each Disbursement this Period

69985.52

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ERIC FLORES FOR CONGRESS**

Mailing Address PO BOX 84

City  
SAN BENITOState  
TXZip Code  
78586

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

FLORES, ERIC, , ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: TX

District: 34

Date of Disbursement

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

FEC Identification Number

**C** C00912246**Transaction ID : SB22.I10690**

Amount of Each Disbursement this Period

180.08

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

94740.13

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

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

PAGE 165 OF 198

|                              |                                        |                              |                             |                              |
|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input checked="" type="checkbox"/> 22 | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Grow the Majority

Full Name (Last, First, Middle Initial)

**A. FEELY FOR CONGRESS**Mailing Address 6501 E. GREENWAY PKWY  
SUITE 103-605City  
SCOTTSDALEState  
AZZip Code  
85254

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

FEELY, THOMAS, JAMES, ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

State: AZ

District: 01

Date of Disbursement

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

FEC Identification Number

☒ C00903088  
**Transaction ID : SB22.I10691**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|
| 6 | 7 | 5 | 3 | 3 | . | 5 | 8 |
|---|---|---|---|---|---|---|---|

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. FEELY FOR CONGRESS**Mailing Address 6501 E. GREENWAY PKWY  
SUITE 103-605City  
SCOTTSDALEState  
AZZip Code  
85254

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

FEELY, THOMAS, JAMES, ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: AZ

District: 01

Date of Disbursement

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

FEC Identification Number

☒ C00903088  
**Transaction ID : SB22.I10692**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|
| 8 | 3 | 5 | 1 | 1 | . | 0 | 5 |
|---|---|---|---|---|---|---|---|

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. FLINT FOR MONTANA**Mailing Address 175 HUTTON RANCH RD  
STE 103 BOX 319City  
KALISPELLState  
MTZip Code  
59901

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

FLINT, AARON, , ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

State: MT

District: 01

Date of Disbursement

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

FEC Identification Number

☒ C00941575  
**Transaction ID : SB22.I10693**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|
| 2 | 2 | 8 | 0 | 2 | . | 1 | 5 |
|---|---|---|---|---|---|---|---|

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

|   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|
| 1 | 7 | 3 | 8 | 4 | 6 | . | 7 | 8 |
|---|---|---|---|---|---|---|---|---|

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

PAGE 166 OF 198

|                              |                                        |                              |                             |                              |
|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input checked="" type="checkbox"/> 22 | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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)

Grow the Majority

Full Name (Last, First, Middle Initial)

**A. HUIZENGA FOR CONGRESS**

Mailing Address PO BOX 254

City  
ZEELANDState  
MIZip Code  
49464

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

HUIZENGA, WILLIAM, P, ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI

District: 04

Category/  
Type

Date of Disbursement

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

FEC Identification Number

☒ C00459297

Transaction ID : SB22.I10694

Amount of Each Disbursement this Period

26220.52

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. HUIZENGA FOR CONGRESS**

Mailing Address PO BOX 254

City  
ZEELANDState  
MIZip Code  
49464

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

HUIZENGA, WILLIAM, P, ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify)

State: MI

District: 04

Category/  
Type

Date of Disbursement

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

FEC Identification Number

☒ C00459297

Transaction ID : SB22.I10695

Amount of Each Disbursement this Period

36522.87

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. IOWANS FOR ZACH NUNN**

Mailing Address P.O. BOX 11

City  
BONDURANTState  
IAZip Code  
50035

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

NUNN, ZACH, , ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA

District: 03

Category/  
Type

Date of Disbursement

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

FEC Identification Number

☒ C00784389

Transaction ID : SB22.I10696

Amount of Each Disbursement this Period

43914.72

☐ Memo Item

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

106658.11

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

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

PAGE 167 OF 198

|                              |                                        |                              |                             |                              |
|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input checked="" type="checkbox"/> 22 | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Grow the Majority

Full Name (Last, First, Middle Initial)

**A. IOWANS FOR ZACH NUNN**

Mailing Address P.O. BOX 11

City  
BONDURANTState  
IAZip Code  
50035

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

NUNN, ZACH, , ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: IA

District: 03

Date of Disbursement

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

FEC Identification Number

**C** C00784389  
**Transaction ID : SB22.I10697**

Amount of Each Disbursement this Period

42196.55

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. JEFF HURD FOR CONGRESS**

Mailing Address 2695 PATTERSON ROAD

City  
GRAND JUNCTIONState  
COZip Code  
81506

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

HURD, JEFFREY, , ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☐ Primary ☒ General  
☐ Other (specify)

State: CO

District: 03

Date of Disbursement

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

FEC Identification Number

**C** C00848333  
**Transaction ID : SB22.I10698**

Amount of Each Disbursement this Period

20253.59

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. JEFF HURD FOR CONGRESS**

Mailing Address 2695 PATTERSON ROAD

City  
GRAND JUNCTIONState  
COZip Code  
81506

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

HURD, JEFFREY, , ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: CO

District: 03

Date of Disbursement

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

FEC Identification Number

**C** C00848333  
**Transaction ID : SB22.I10699**

Amount of Each Disbursement this Period

36599.41

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

99049.55

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

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

PAGE 168 OF 198

|                              |                                        |                              |                             |                              |
|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input checked="" type="checkbox"/> 22 | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Grow the Majority

Full Name (Last, First, Middle Initial)

**A. JOHN BRAUN FOR CONGRESS**

Mailing Address PO BOX 123

City  
CHEHALISState  
WAZip Code  
98532

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

BRAUN, JOHN, , ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

State: WA

District: 03

Date of Disbursement

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

FEC Identification Number

**C** C00915884**Transaction ID : SB22.I10700**

Amount of Each Disbursement this Period

46195.06

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. JOHN BRAUN FOR CONGRESS**

Mailing Address PO BOX 123

City  
CHEHALISState  
WAZip Code  
98532

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

BRAUN, JOHN, , ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: WA

District: 03

Date of Disbursement

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

FEC Identification Number

**C** C00915884**Transaction ID : SB22.I10701**

Amount of Each Disbursement this Period

60540.24

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. KEAN FOR CONGRESS**

Mailing Address P.O. BOX 999

City  
EDISONState  
NJZip Code  
08818

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

KEAN, JR., THOMAS, H., , JR.

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NJ

District: 07

Date of Disbursement

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

FEC Identification Number

**C** C00703058**Transaction ID : SB22.I10702**

Amount of Each Disbursement this Period

43206.28

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

149941.58

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

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

PAGE 169 OF 198

|                              |                                        |                              |                             |                              |
|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input checked="" type="checkbox"/> 22 | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Grow the Majority

Full Name (Last, First, Middle Initial)

**A. KEAN FOR CONGRESS**

Mailing Address P.O. BOX 999

City  
EDISONState  
NJZip Code  
08818

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

KEAN, JR., THOMAS, H., , JR.

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: NJ

District: 07

Date of Disbursement

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

FEC Identification Number

**C** C00703058**Transaction ID : SB22.I10703**

Amount of Each Disbursement this Period

37783.35

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. KEVIN KILEY FOR CONGRESS**

Mailing Address 9460 TEGNER ROAD

City  
HILMARState  
CAZip Code  
95324

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

KILEY, KEVIN, , ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☐ Primary ☒ General  
☐ Other (specify)

State: CA

District: 03

Date of Disbursement

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

FEC Identification Number

**C** C00801985**Transaction ID : SB22.I10704**

Amount of Each Disbursement this Period

17313.68

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. KEVIN KILEY FOR CONGRESS**

Mailing Address 9460 TEGNER ROAD

City  
HILMARState  
CAZip Code  
95324

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

KILEY, KEVIN, , ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA

District: 03

Date of Disbursement

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

FEC Identification Number

**C** C00801985**Transaction ID : SB22.I10705**

Amount of Each Disbursement this Period

21881.82

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

76978.85

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

|                          |     |                                     |     |                          |     |                          |    |                          |     |
|--------------------------|-----|-------------------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <input type="checkbox"/> | 21b | <input checked="" type="checkbox"/> | 22  | <input type="checkbox"/> | 23  | <input type="checkbox"/> | 26 | <input type="checkbox"/> | 27  |
| <input type="checkbox"/> | 28a | <input type="checkbox"/>            | 28b | <input type="checkbox"/> | 28c | <input type="checkbox"/> | 29 | <input type="checkbox"/> | 30b |

FEC Schedule B (Form 3X) Rev. 05/2016

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

PAGE 171 OF 198

|                              |                                        |                              |                             |                              |
|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input checked="" type="checkbox"/> 22 | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Grow the Majority

Full Name (Last, First, Middle Initial)

**A. KIGGANS FOR CONGRESS**

Mailing Address P.O. BOX 5042

City  
VIRGINIA BEACHState  
VAZip Code  
23471

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

KIGGANS, JENNIFER, , ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: VA

District: 02

Date of Disbursement

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

FEC Identification Number

**C** C00776120

Transaction ID : SB22.I10709

Amount of Each Disbursement this Period

62756.67

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. LALOTA FOR CONGRESS**

Mailing Address PO BOX 5744

City  
HAUPPAUGEState  
NYZip Code  
11788

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

NICK, LALOTA, , ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☐ Primary ☒ General  
☐ Other (specify)

State: NY

District: 01

Date of Disbursement

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

FEC Identification Number

**C** C00806018

Transaction ID : SB22.I10710

Amount of Each Disbursement this Period

19474.76

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. LALOTA FOR CONGRESS**

Mailing Address PO BOX 5744

City  
HAUPPAUGEState  
NYZip Code  
11788

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

NICK, LALOTA, , ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: NY

District: 01

Date of Disbursement

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

FEC Identification Number

**C** C00806018

Transaction ID : SB22.I10711

Amount of Each Disbursement this Period

27227.81

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

109459.24

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

PAGE 172 OF 198

|                              |                                        |                              |                             |                              |
|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input checked="" type="checkbox"/> 22 | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name (Last, First, Middle Initial)

**A. LAURIE BUCKHOUT FOR CONGRESS**

Mailing Address PO BOX 97275

City  
RALEIGHState  
NCZip Code  
27624

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

BUCKHOUT, LAURIE, , ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NC

District: 01

Date of Disbursement

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

FEC Identification Number

**C** C00853499**Transaction ID : SB22.I10712**

Amount of Each Disbursement this Period

51935.21

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. LAWLER FOR CONGRESS**

Mailing Address PO BOX 87

City  
SOUTH SALEMState  
NYZip Code  
10590

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

LAWLER, MICHAEL, VINCENT, ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NY

District: 17

Date of Disbursement

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

FEC Identification Number

**C** C00815415**Transaction ID : SB22.I10713**

Amount of Each Disbursement this Period

45640.83

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. LAWLER FOR CONGRESS**

Mailing Address PO BOX 87

City  
SOUTH SALEMState  
NYZip Code  
10590

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

LAWLER, MICHAEL, VINCENT, ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: NY

District: 17

Date of Disbursement

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

FEC Identification Number

**C** C00815415**Transaction ID : SB22.I10714**

Amount of Each Disbursement this Period

58403.81

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

155979.85

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

PAGE 173 OF 198

|                              |                                        |                              |                             |                              |
|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input checked="" type="checkbox"/> 22 | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Grow the Majority

Full Name (Last, First, Middle Initial)

**A. MACKENZIE FOR CONGRESS COMMITTEE**

Mailing Address PO BOX 747

City  
EMMAUSState  
PAZip Code  
18049

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

MACKENZIE, RYAN, EDWARD, ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

State: PA

District: 07

Date of Disbursement

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

FEC Identification Number

**C** C00846501**Transaction ID : SB22.I10715**

Amount of Each Disbursement this Period

36586.88

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MACKENZIE FOR CONGRESS COMMITTEE**

Mailing Address PO BOX 747

City  
EMMAUSState  
PAZip Code  
18049

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

MACKENZIE, RYAN, EDWARD, ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify)

State: PA

District: 07

Date of Disbursement

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

FEC Identification Number

**C** C00846501**Transaction ID : SB22.I10716**

Amount of Each Disbursement this Period

51695.36

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MARTY FOR CONGRESS**Mailing Address 3275 N FORT APACHE RD  
SUITE 150City  
LAS VEGASState  
NVZip Code  
89129

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

O'DONNELL, MARTY, ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NV

District: 03

Date of Disbursement

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

FEC Identification Number

**C** C00900910**Transaction ID : SB22.I10717**

Amount of Each Disbursement this Period

31216.73

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

119498.97

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

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

PAGE 174 OF 198

|                              |                                        |                              |                             |                              |
|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input checked="" type="checkbox"/> 22 | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Grow the Majority

Full Name (Last, First, Middle Initial)

**A. MARTY FOR CONGRESS**Mailing Address 3275 N FORT APACHE RD  
SUITE 150City  
LAS VEGASState  
NVZip Code  
89129

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

O'DONNELL, MARTY, , ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: NV

District: 03

Date of Disbursement

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

FEC Identification Number

**C** C00900910

Transaction ID : SB22.I10718

Amount of Each Disbursement this Period

57544.59

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MIKE LIPETRI FOR CONGRESS**Mailing Address 192 MERRITTS RD  
STE B #171City  
FARMINGDALEState  
NYZip Code  
11735

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

LIPETRI, MIKE, , ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NY

District: 03

Date of Disbursement

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

FEC Identification Number

**C** C00937490

Transaction ID : SB22.I10721

Amount of Each Disbursement this Period

46019.93

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MIKE LIPETRI FOR CONGRESS**Mailing Address 192 MERRITTS RD  
STE B #171City  
FARMINGDALEState  
NYZip Code  
11735

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

LIPETRI, MIKE, , ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: NY

District: 03

Date of Disbursement

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

FEC Identification Number

**C** C00937490

Transaction ID : SB22.I10722

Amount of Each Disbursement this Period

76573.71

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

180138.23

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

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

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|                              |                                        |                              |                             |                              |
|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input checked="" type="checkbox"/> 22 | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name (Last, First, Middle Initial)

**A. MILLER-MEEKS FOR CONGRESS**

Mailing Address P.O. BOX 33

City  
OTTUMWAState  
IAZip Code  
52501

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

MILLER-MEEKS, MARIANNETTE, JANE, ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA

District: 01

Date of Disbursement

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

FEC Identification Number

**C** C00558825**Transaction ID : SB22.I10723**

Amount of Each Disbursement this Period

53889.37

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MILLER-MEEKS FOR CONGRESS**

Mailing Address P.O. BOX 33

City  
OTTUMWAState  
IAZip Code  
52501

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

MILLER-MEEKS, MARIANNETTE, JANE, ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: IA

District: 01

Date of Disbursement

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

FEC Identification Number

**C** C00558825**Transaction ID : SB22.I10724**

Amount of Each Disbursement this Period

47289.67

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MONICA FOR CONGRESS**Mailing Address 1317 W FRONTAGE RD  
STE ACity  
ALAMOState  
TXZip Code  
78516-4605

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

DE LA CRUZ, MONICA, , ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

State: TX

District: 15

Date of Disbursement

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

FEC Identification Number

**C** C00765719**Transaction ID : SB22.I10725**

Amount of Each Disbursement this Period

33163.59

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

134342.63

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

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|                              |                                        |                              |                             |                              |
|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input checked="" type="checkbox"/> 22 | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Grow the Majority

Full Name (Last, First, Middle Initial)

**A. MONICA FOR CONGRESS**Mailing Address 1317 W FRONTAGE RD  
STE ACity  
ALAMOState  
TXZip Code  
78516-4605

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

DE LA CRUZ, MONICA, , ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: TX

District: 15

Date of Disbursement

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

FEC Identification Number

**C** C00765719**Transaction ID : SB22.I10726**

Amount of Each Disbursement this Period

4602.80

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. PATRIOTS FOR PERRY**Mailing Address 4075 LINGLESTOWN ROAD  
PMB 119City  
HARRISBURGState  
PAZip Code  
17112

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

PERRY, SCOTT, , ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

State: PA

District: 10

Date of Disbursement

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

FEC Identification Number

**C** C00510164**Transaction ID : SB22.I10727**

Amount of Each Disbursement this Period

39307.72

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. PATRIOTS FOR PERRY**Mailing Address 4075 LINGLESTOWN ROAD  
PMB 119City  
HARRISBURGState  
PAZip Code  
17112

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

PERRY, SCOTT, , ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: PA

District: 10

Date of Disbursement

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

FEC Identification Number

**C** C00510164**Transaction ID : SB22.I10728**

Amount of Each Disbursement this Period

39920.17

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

83830.69

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

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

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|                              |                                        |                              |                             |                              |
|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input checked="" type="checkbox"/> 22 | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Grow the Majority

Full Name (Last, First, Middle Initial)

**A. PAUL LEPAGE FOR CONGRESS**

Mailing Address PO BOX 49

City  
AUGUSTAState  
MEZip Code  
04332

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

LEPAGE, PAUL, , ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

State: ME

District: 02

Date of Disbursement

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

FEC Identification Number

**C** C00904094**Transaction ID : SB22.I10729**

Amount of Each Disbursement this Period

46064.95

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. PAUL LEPAGE FOR CONGRESS**

Mailing Address PO BOX 49

City  
AUGUSTAState  
MEZip Code  
04332

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

LEPAGE, PAUL, , ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify)

State: ME

District: 02

Date of Disbursement

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

FEC Identification Number

**C** C00904094**Transaction ID : SB22.I10730**

Amount of Each Disbursement this Period

52885.83

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. PETER FOR NY INC.**Mailing Address 1390 CHAIN BRIDGE RD  
STE 515City  
MCLEANState  
VAZip Code  
22101

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

OBERACKER, PETER, KARL, , JR

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NY

District: 19

Date of Disbursement

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

FEC Identification Number

**C** C00921668**Transaction ID : SB22.I10731**

Amount of Each Disbursement this Period

58640.30

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

157591.08

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

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

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|                              |                                        |                              |                             |                              |
|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input checked="" type="checkbox"/> 22 | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name (Last, First, Middle Initial)

**A. PETER FOR NY INC.**Mailing Address 1390 CHAIN BRIDGE RD  
STE 515City  
MCLEANState  
VAZip Code  
22101

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

OBERACKER, PETER, KARL, , JR

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: NY

District: 19

Date of Disbursement

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

FEC Identification Number

**C** C00921668**Transaction ID : SB22.I10732**

Amount of Each Disbursement this Period

79524.39

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ROB FOR PA**

Mailing Address 11 DOCK ST BOX 971

City  
PITTSTONState  
PAZip Code  
18640

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

BRESNAHAN, ROB, ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☐ Primary ☒ General  
☐ Other (specify)

State: PA

District: 08

Date of Disbursement

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

FEC Identification Number

**C** C00852137**Transaction ID : SB22.I10733**

Amount of Each Disbursement this Period

28497.42

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ROB FOR PA**

Mailing Address 11 DOCK ST BOX 971

City  
PITTSTONState  
PAZip Code  
18640

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

BRESNAHAN, ROB, ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: PA

District: 08

Date of Disbursement

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

FEC Identification Number

**C** C00852137**Transaction ID : SB22.I10734**

Amount of Each Disbursement this Period

34574.68

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

142596.49

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

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

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|                              |                                        |                              |                             |                              |
|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input checked="" type="checkbox"/> 22 | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name (Last, First, Middle Initial)

**A. ROB WITTMAN FOR CONGRESS**

Mailing Address PO BOX 427

City  
ALEXANDRIAState  
VAZip Code  
22313

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

WITTMAN, ROBERT, J., MR.,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

State: VA

District: 01

Date of Disbursement

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

FEC Identification Number

**C** C00441014**Transaction ID : SB22.I10735**

Amount of Each Disbursement this Period

27543.26

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ROB WITTMAN FOR CONGRESS**

Mailing Address PO BOX 427

City  
ALEXANDRIAState  
VAZip Code  
22313

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

WITTMAN, ROBERT, J., MR.,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: VA

District: 01

Date of Disbursement

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

FEC Identification Number

**C** C00441014**Transaction ID : SB22.I10736**

Amount of Each Disbursement this Period

35048.18

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. STEIL FOR WISCONSIN INC**

Mailing Address PO BOX 103

City  
OAK CREEKState  
WIZip Code  
53154

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

STEIL, BRYAN, GEORGE, ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

State: WI

District: 01

Date of Disbursement

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

FEC Identification Number

**C** C00677286**Transaction ID : SB22.I10737**

Amount of Each Disbursement this Period

17555.10

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

80146.54

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

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

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|                              |                                        |                              |                             |                              |
|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input checked="" type="checkbox"/> 22 | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name (Last, First, Middle Initial)

**A. STEIL FOR WISCONSIN INC**

Mailing Address PO BOX 103

City  
OAK CREEKState  
WIZip Code  
53154

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

STEIL, BRYAN, GEORGE, ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: WI

District: 01

Date of Disbursement

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

FEC Identification Number

**C** C00677286  
**Transaction ID : SB22.I10738**

Amount of Each Disbursement this Period

28384.47

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. TANO TIJERINA FOR CONGRESS INC**

Mailing Address PO BOX 450170

City  
LAREDOState  
TXZip Code  
78045

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

TIJERINA, TANO, , ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

State: TX

District: 28

Date of Disbursement

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

FEC Identification Number

**C** C00929174  
**Transaction ID : SB22.I10739**

Amount of Each Disbursement this Period

58878.04

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. TANO TIJERINA FOR CONGRESS INC**

Mailing Address PO BOX 450170

City  
LAREDOState  
TXZip Code  
78045

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

TIJERINA, TANO, , ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: TX

District: 28

Date of Disbursement

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

FEC Identification Number

**C** C00929174  
**Transaction ID : SB22.I10740**

Amount of Each Disbursement this Period

3143.52

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

90406.03

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

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

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|                              |                                        |                              |                             |                              |
|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input checked="" type="checkbox"/> 22 | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Grow the Majority

Full Name (Last, First, Middle Initial)

**A. TOM BARRETT FOR CONGRESS**

Mailing Address P.O. BOX 15221

City  
LANSINGState  
MIZip Code  
48901

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

BARRETT, THOMAS, MORE, ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI

District: 07

Date of Disbursement

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

FEC Identification Number

**C** C00793976**Transaction ID : SB22.I10741**

Amount of Each Disbursement this Period

52483.03

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. TOM BARRETT FOR CONGRESS**

Mailing Address P.O. BOX 15221

City  
LANSINGState  
MIZip Code  
48901

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

BARRETT, THOMAS, MORE, ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify)

State: MI

District: 07

Date of Disbursement

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

FEC Identification Number

**C** C00793976**Transaction ID : SB22.I10742**

Amount of Each Disbursement this Period

60993.73

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. VALADAO FOR CONGRESS**Mailing Address 5132 N PALM AVE  
# 227City  
FRESNOState  
CAZip Code  
93704

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

VALADAO, DAVID, , ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

State: CA

District: 22

Date of Disbursement

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

FEC Identification Number

**C** C00499392**Transaction ID : SB22.I10743**

Amount of Each Disbursement this Period

52956.74

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

166433.50

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

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

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|                              |                                        |                              |                             |                              |
|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input checked="" type="checkbox"/> 22 | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name (Last, First, Middle Initial)

**A. VALADAO FOR CONGRESS**Mailing Address 5132 N PALM AVE  
# 227City  
FRESNOState  
CAZip Code  
93704

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

VALADAO, DAVID, , ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA

District: 22

Date of Disbursement

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

FEC Identification Number

**C** C00499392**Transaction ID : SB22.I10744**

Amount of Each Disbursement this Period

46589.99

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. VAN ORDEN FOR CONGRESS**

Mailing Address PO BOX 1836

City  
LA CROSSEState  
WIZip Code  
54602

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

VAN ORDEN, DERRICK, F., MR.,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

State: WI

District: 03

Date of Disbursement

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

FEC Identification Number

**C** C00742007**Transaction ID : SB22.I10745**

Amount of Each Disbursement this Period

48676.24

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. VAN ORDEN FOR CONGRESS**

Mailing Address PO BOX 1836

City  
LA CROSSEState  
WIZip Code  
54602

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

VAN ORDEN, DERRICK, F., MR.,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: WI

District: 03

Date of Disbursement

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

FEC Identification Number

**C** C00742007**Transaction ID : SB22.I10746**

Amount of Each Disbursement this Period

50327.63

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

145593.86

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

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☒ 22 ☐ 23 ☐ 26 ☐ 27  
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name (Last, First, Middle Initial)

**A. NRCC**

Mailing Address 320 1ST ST SE

City  
WASHINGTON

State  
DC

Zip Code  
20003

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS-BLDG

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
06 / 26 / 2026

FEC Identification Number

**C** C00075820

**Transaction ID : SB22.I10769**

Amount of Each Disbursement this Period

1671065.13

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. NRCC**

Mailing Address 320 1ST ST SE

City  
WASHINGTON

State  
DC

Zip Code  
20003

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
06 / 26 / 2026

FEC Identification Number

**C** C00075820

**Transaction ID : SB22.I10772**

Amount of Each Disbursement this Period

2682025.67

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. NRCC**

Mailing Address 320 1ST ST SE

City  
WASHINGTON

State  
DC

Zip Code  
20003

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS-LEGAL

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
06 / 26 / 2026

FEC Identification Number

**C** C00075820

**Transaction ID : SB22.I10775**

Amount of Each Disbursement this Period

2105692.21

☐ Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ►

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

6458783.01

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

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|                              |                                        |                              |                             |                              |
|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input checked="" type="checkbox"/> 22 | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name (Last, First, Middle Initial)

**A. BRINKER HARDING FOR CONGRESS- GTM NOMINEE FUND NE-02**

Mailing Address 228 S WASHINGTON ST STE 115

City  
ALEXANDRIAState  
VAZip Code  
22314

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C** C00919449**Transaction ID : SB22.I10751**

Amount of Each Disbursement this Period

18636.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CARRIE BUCK FOR CONGRESS-GTM NOMINEE FUND NV-01**

Mailing Address 228 S WASHINGTON ST STE 115

City  
ALEXANDRIAState  
VAZip Code  
22314

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C** C00919456**Transaction ID : SB22.I10753**

Amount of Each Disbursement this Period

21630.58

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CONROY FOR CONGRESS- GTM NOMINEE FUND OH-01**

Mailing Address 228 S WASHINGTON ST STE 115

City  
ALEXANDRIAState  
VAZip Code  
22314

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C** C00946335**Transaction ID : SB22.I10755**

Amount of Each Disbursement this Period

24890.75

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

65157.58

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

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|                              |                                        |                              |                             |                              |
|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input checked="" type="checkbox"/> 22 | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Grow the Majority

Full Name (Last, First, Middle Initial)

**A. CUNNINGHAM FOR NM- GTM NOMINEE FUND NM-02**

Mailing Address 228 S WASHINGTON ST STE 115

City  
ALEXANDRIAState  
VAZip Code  
22314

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C C00894501

Transaction ID : SB22.I10752

Amount of Each Disbursement this Period

14084.05

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DEREK MERRIN FOR CONGRESS- GTM NOMINEE FUND OH-09**

Mailing Address 228 S WASHINGTON ST STE 115

City  
ALEXANDRIAState  
VAZip Code  
22314

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C C00894535

Transaction ID : SB22.I10756

Amount of Each Disbursement this Period

14224.41

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MARTY FOR CONGRESS- GTM NOMINEE FUND NV-03**

Mailing Address 228 S WASHINGTON ST STE 115

City  
ALEXANDRIAState  
VAZip Code  
22314

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C C00894519

Transaction ID : SB22.I10754

Amount of Each Disbursement this Period

17126.31

☐ Memo Item

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

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

45434.77

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

PAGE 186 OF 198

|                              |                                        |                              |                             |                              |
|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input checked="" type="checkbox"/> 22 | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name (Last, First, Middle Initial)

**A. MIKE JOHNSON FOR LOUISIANA**Mailing Address C/O 228 S WASHINGTON ST  
STE 115City  
ALEXANDRIAState  
VAZip Code  
22314

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

JOHNSON, JAMES, MICHAEL, ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

State: LA

District: 04

Date of Disbursement

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

FEC Identification Number

**C** C00608695  
**Transaction ID : SB22.I10719**

Amount of Each Disbursement this Period

346049.89

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MIKE JOHNSON FOR LOUISIANA**Mailing Address C/O 228 S WASHINGTON ST  
STE 115City  
ALEXANDRIAState  
VAZip Code  
22314

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

JOHNSON, JAMES, MICHAEL, ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: LA

District: 04

Date of Disbursement

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

FEC Identification Number

**C** C00608695  
**Transaction ID : SB22.I10720**

Amount of Each Disbursement this Period

348089.38

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. AMERICAN REVIVAL PAC**Mailing Address C/O 228 S WASHINGTON ST  
STE 115City  
ALEXANDRIAState  
VAZip Code  
22314

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C** C00639229  
**Transaction ID : SB22.I10747**

Amount of Each Disbursement this Period

636506.44

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

1330645.71

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

PAGE 187 OF 198

|                              |                                        |                              |                             |                              |
|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input checked="" type="checkbox"/> 22 | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Grow the Majority

Full Name (Last, First, Middle Initial)

**A. CONGRESSIONAL LEADERSHIP FUND-CONTRIB**

Date of Disbursement

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

Mailing Address 1747 PENNSYLVANIA AVENUE, NW  
5TH FLOORCity  
WASHINGTONState  
DCZip Code  
20006

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

Category/  
Type

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:

FEC Identification Number

**C** C00504530

Transaction ID : SB22.I10748

Amount of Each Disbursement this Period

85856.47

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. GTM NOMINEE FUND MI-08**

Date of Disbursement

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

Mailing Address 228 S WASHINGTON ST STE 115

City  
ALEXANDRIAState  
VAZip Code  
22314

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

Category/  
Type

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:

FEC Identification Number

**C** C00894469

Transaction ID : SB22.I10749

Amount of Each Disbursement this Period

24398.26

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. GTM NOMINEE FUND MI-10**

Date of Disbursement

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

Mailing Address 228 S WASHINGTON ST STE 115

City  
ALEXANDRIAState  
VAZip Code  
22314

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

Category/  
Type

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:

FEC Identification Number

**C** C00919431

Transaction ID : SB22.I10750

Amount of Each Disbursement this Period

31896.87

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

142151.60

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

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

PAGE 188 OF 198

|                              |                                        |                              |                             |                              |
|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input checked="" type="checkbox"/> 22 | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Grow the Majority

Full Name (Last, First, Middle Initial)

**A. GTM NOMINEE FUND WA-03**

Mailing Address 228 S WASHINGTON ST STE 115

City  
ALEXANDRIAState  
VAZip Code  
22314

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

**C** C00894568**Transaction ID : SB22.I10757**

Amount of Each Disbursement this Period

14073.77

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. GTM NOMINEE FUND FL-14**

Mailing Address 228 S WASHINGTON ST STE 115

City  
ALEXANDRIAState  
VAZip Code  
22314

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

**C** C00954925**Transaction ID : SB22.I10790**

Amount of Each Disbursement this Period

8983.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. GTM NOMINEE FUND FL22**

Mailing Address 228 S WASHINGTON ST STE 115

City  
ALEXANDRIAState  
VAZip Code  
22314

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

**C** C00954933**Transaction ID : SB22.I10791**

Amount of Each Disbursement this Period

8983.00

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

32039.77

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

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

PAGE 189 OF 198

|                              |                                        |                              |                             |                              |
|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input checked="" type="checkbox"/> 22 | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Grow the Majority

Full Name (Last, First, Middle Initial)

**A. GTM NOMINEE FUND FL25**

Mailing Address 228 S WASHINGTON ST STE 115

City  
ALEXANDRIAState  
VAZip Code  
22314

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Category/  
Type

Date of Disbursement

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

FEC Identification Number

**C** C00954941**Transaction ID : SB22.I10792**

Amount of Each Disbursement this Period

8983.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. GTM NOMINEE FUND NH01**

Mailing Address 228 S WASHINGTON ST STE 115

City  
ALEXANDRIAState  
VAZip Code  
22314

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Category/  
Type

Date of Disbursement

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

FEC Identification Number

**C** C00954917**Transaction ID : SB22.I10793**

Amount of Each Disbursement this Period

8983.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ALASKA REPUBLICAN PARTY**

Mailing Address PO BOX 110707

City  
ANCHORAGEState  
AKZip Code  
99511

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Category/  
Type

Date of Disbursement

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

FEC Identification Number

**C** C00253260**Transaction ID : SB22.I10758**

Amount of Each Disbursement this Period

62020.91

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

79986.91

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

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

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|                              |                                        |                              |                             |                              |
|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input checked="" type="checkbox"/> 22 | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Grow the Majority

Full Name (Last, First, Middle Initial)

**A. ARIZONA REPUBLICAN PARTY**Mailing Address 3033 N CENTRAL AVE  
SUITE 300City  
PHOENIXState  
AZZip Code  
85012

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C** C00008227

Transaction ID : SB22.I10759

Amount of Each Disbursement this Period

70346.62

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. INDIANA REPUBLICAN STATE COMMITTEE**Mailing Address 101 WEST OHIO STREET  
SUITE 2200City  
INDIANAPOLISState  
INZip Code  
46204

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C** C00006486

Transaction ID : SB22.I10760

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MAINE REPUBLICAN PARTY**

Mailing Address 9 HIGGINS STREET

City  
AUGUSTAState  
MEZip Code  
04330

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C** C00003111

Transaction ID : SB22.I10761

Amount of Each Disbursement this Period

61982.07

☐ Memo Item

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

132338.69

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

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

PAGE 191 OF 198

|                              |                                        |                              |                             |                              |
|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input checked="" type="checkbox"/> 22 | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Grow the Majority

Full Name (Last, First, Middle Initial)

**A. MICHIGAN REPUBLICAN PARTY**Mailing Address 3450 ALPINE AVE NW  
BOX 332City  
GRAND RAPIDSState  
MIZip Code  
49544

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

**C** C00041160

Transaction ID : SB22.I10762

Amount of Each Disbursement this Period

79092.55

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MONTANA REPUBLICAN STATE CENTRAL CMTE**

Mailing Address PO BOX 935

City  
HELENAState  
MTZip Code  
59624

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

**C** C00008086

Transaction ID : SB22.I10763

Amount of Each Disbursement this Period

62155.80

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. NEVADA REPUBLICAN PARTY**

Mailing Address 840 S. RANCHO DR. SUITE 4-800

City  
LAS VEGASState  
NVZip Code  
89106-3837

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

**C** C00082925

Transaction ID : SB22.I10764

Amount of Each Disbursement this Period

70224.85

☐ Memo Item

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

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

211473.20

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

PAGE 192 OF 198

|                              |                                        |                              |                             |                              |
|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input checked="" type="checkbox"/> 22 | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Grow the Majority

Full Name (Last, First, Middle Initial)

**A. NEW HAMPSHIRE REPUBLICAN STATE CMTE**

Mailing Address 10 WATER ST

City  
CONCORDState  
NHZip Code  
03301-4844

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

**C** C00136457**Transaction ID : SB22.I10765**

Amount of Each Disbursement this Period

70361.74

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. NEW JERSEY REPUBLICAN STATE COMMITTEE**

Mailing Address PO BOX 408

City  
BAYVILLEState  
NJZip Code  
08721

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

**C** C00164418**Transaction ID : SB22.I10766**

Amount of Each Disbursement this Period

6031.44

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. NORTH CAROLINA REPUBLICAN PARTY**

Mailing Address 1506 HILLSBOROUGH ST

City  
RALEIGHState  
NCZip Code  
27605-1831

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

**C** C00038505**Transaction ID : SB22.I10767**

Amount of Each Disbursement this Period

61692.88

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

138086.06

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

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

PAGE 193 OF 198

|                              |                                        |                              |                             |                              |
|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input checked="" type="checkbox"/> 22 | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name (Last, First, Middle Initial)

**A. NRCC**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS-BLDG

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C** C00075820**Transaction ID : SB22.I10770**

Amount of Each Disbursement this Period

237000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. NRCC**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C** C00075820**Transaction ID : SB22.I10773**

Amount of Each Disbursement this Period

352000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. NRCC**

Mailing Address 320 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS-LEGAL

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C** C00075820**Transaction ID : SB22.I10776**

Amount of Each Disbursement this Period

334000.00

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

923000.00

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

PAGE 194 OF 198

|                              |                                        |                              |                             |                              |
|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input checked="" type="checkbox"/> 22 | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Grow the Majority

Full Name (Last, First, Middle Initial)

**A. NY REPUBLICAN FED CAMP CMTE**

Mailing Address 315 STATE ST

City  
ALBANYState  
NYZip Code  
12210-2001

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C C00055582

Transaction ID : SB22.I10777

Amount of Each Disbursement this Period

70635.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. OHIO REPUBLICAN PARTY**

Mailing Address 211 S FIFTH STREET

City  
COLUMBUSState  
OHZip Code  
43215

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C C00162339

Transaction ID : SB22.I10778

Amount of Each Disbursement this Period

61912.91

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. OREGON REPUBLICAN PARTY**

Mailing Address PO BOX 1586

City  
LAKE OSWEGOState  
ORZip Code  
97035

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C C00153031

Transaction ID : SB22.I10779

Amount of Each Disbursement this Period

10.00

☐ Memo Item

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

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

132558.41

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

PAGE 195 OF 198

|                              |                                        |                              |                             |                              |
|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input checked="" type="checkbox"/> 22 | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name (Last, First, Middle Initial)

**A. REPUBLICAN CAMP CMTE OF NEW MEXICO**

Mailing Address PO BOX 94083

City  
ALBUQUERQUEState  
NMZip Code  
87199-4083

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

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

FEC Identification Number

**C** C00020818**Transaction ID : SB22.I10780**

Amount of Each Disbursement this Period

70224.85

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. REPUBLICAN FED CMTE OF PENNSYLVANIA**

Mailing Address 3501 NORTH FRONT STREET STE 200

City  
HARRISBURGState  
PAZip Code  
17110

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

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

FEC Identification Number

**C** C00044842**Transaction ID : SB22.I10781**

Amount of Each Disbursement this Period

79132.40

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. REPUBLICAN NATIONAL COMMITTEE**

Mailing Address 310 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS-BLDG

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

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

FEC Identification Number

**C** C00003418**Transaction ID : SB22.I10782**

Amount of Each Disbursement this Period

410979.61

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

560336.86

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

PAGE 196 OF 198

|                              |                                        |                              |                             |                              |
|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input checked="" type="checkbox"/> 22 | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name (Last, First, Middle Initial)

**A. REPUBLICAN NATIONAL COMMITTEE**

Mailing Address 310 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C** C00003418**Transaction ID : SB22.I10783**

Amount of Each Disbursement this Period

152270.81

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. REPUBLICAN NATIONAL COMMITTEE**

Mailing Address 310 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C** C00003418**Transaction ID : SB22.I10784**

Amount of Each Disbursement this Period

408519.34

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. REPUBLICAN PARTY OF FLORIDA**

Mailing Address 420 E. JEFFERSON STREET

City  
TALLAHASSEEState  
FLZip Code  
32301

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C** C00099259**Transaction ID : SB22.I10785**

Amount of Each Disbursement this Period

61982.22

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

622772.37

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

PAGE 197 OF 198

|                              |                                        |                              |                             |                              |
|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input checked="" type="checkbox"/> 22 | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Grow the Majority

Full Name (Last, First, Middle Initial)

**A. REPUBLICAN PARTY OF IOWA**

Mailing Address 621 E 9TH ST

City  
DES MOINESState  
IAZip Code  
50309

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

**C** C00014498**Transaction ID : SB22.I10786**

Amount of Each Disbursement this Period

62157.79

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. REPUBLICAN PARTY OF LOUISIANA**

Mailing Address 3700 ESSEN LANE

City  
BATON ROUGEState  
LAZip Code  
70809

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

**C** C00187450**Transaction ID : SB22.I10787**

Amount of Each Disbursement this Period

79268.27

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. REPUBLICAN PARTY OF VIRGINIA**

Mailing Address 115 EAST GRACE STREET

City  
RICHMONDState  
VAZip Code  
23219-1741

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

**C** C00001305**Transaction ID : SB22.I10788**

Amount of Each Disbursement this Period

71209.34

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

212635.40

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☒ 22 ☐ 23 ☐ 26 ☐ 27  
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

**Grow the Majority**

Full Name (Last, First, Middle Initial)

## **A. REPUBLICAN PARTY OF WISCONSIN**

Mailing Address 148 E. JOHNSON ST.

City  
MADISON

State  
WI

Zip Code  
53703

Purpose of Disbursement

DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2026

FEC Identification Number

C C00074450

**Transaction ID : SB22.I10789**

Amount of Each Disbursement this Period

71375.80

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ►

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

71375.80

15208448.97