

FEC  
FORM 3XREPORT 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

COLORADO WESTERN POLITICAL ACTION COMMITTEE

ADDRESS (number and street)

2318 CURTIS STREET

▼  
 Check if different  
than previously  
reported. (ACC)

DENVER

CO

80205

-

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

 C C008853193. 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 /  D D /  Y Y Y Yin the  
State of(d) 30-Day  
POST-Election  
Report for the: General (30G) Runoff (30R) Special (30S)

Election on

 M M /  D D /  Y Y Y Y Yin the  
State of

5. Covering Period

 07 01 2025

through

 12 31 2025

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

Type or Print Name of Treasurer

KENNEDY, KATIE, , ,

Signature of Treasurer

KENNEDY, KATIE, , ,

Date

 01 29 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  
OnlyFEC FORM 3X  
Rev. 05/2016

**SUMMARY PAGE**  
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page **2**

Write or Type Committee Name

**COLORADO WESTERN POLITICAL ACTION COMMITTEE**

Report Covering the Period: From:

|    |    |   |      |   |   |   |   |   |   |
|----|----|---|------|---|---|---|---|---|---|
| M  | M  | / | D    | D | / | Y | Y | Y | Y |
| 07 | 01 |   | 2025 |   |   |   |   |   |   |

To:

|    |    |   |      |   |   |   |   |   |   |
|----|----|---|------|---|---|---|---|---|---|
| M  | M  | / | D    | D | / | Y | Y | Y | Y |
| 12 | 31 |   | 2025 |   |   |   |   |   |   |

**COLUMN A**  
This Period

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

|  |                   |          |
|--|-------------------|----------|
| 6. (a) Cash on Hand<br>January 1,  | Y Y Y Y Y<br>2025 | 2993.85  |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....  | 3980.65           |          |
| (c) Total Receipts (from Line 19) .....  | 57150.12          | 87150.12 |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B) .....             | 61130.77          | 90143.97 |
| 7. Total Disbursements (from Line 31).....   | 37022.00          | 66035.20 |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)) .....                        | 24108.77          | 24108.77 |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 0.00              |          |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | 0.00              |          |



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

COLORADO WESTERN POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

M M  
07D D  
01Y Y Y Y Y  
2025

To:

M M  
12D D  
31Y Y Y Y  
2025

| I. Receipts   | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:  |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees   |                               |                                   |
| (i) Itemized (use Schedule A).....  | 9500.00                       | 34500.00                          |
| (ii) Unitemized .....   | 0.00                          | 0.00                              |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....►   | 9500.00                       | 34500.00                          |
| (b) Political Party Committees .....  | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs).....  | 15500.00                      | 20500.00                          |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....  | 25000.00                      | 55000.00                          |
| 12. Transfers From Affiliated/Other Party Committees.....   | 32150.12                      | 32150.12                          |
| 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)) .....                         | 57150.12                      | 87150.12                          |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....                                   | 57150.12                      | 87150.12                          |

## 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)                                  | 0.00                          | 0.00                              |
| (i) Federal Share .....  | 0.00                          | 0.00                              |
| (ii) Non-Federal Share.....  | 0.00                          | 0.00                              |
| (b) Other Federal Operating Expenditures .....   | 2522.00                       | 6035.20                           |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                        | 2522.00                       | 6035.20                           |
| 22. Transfers to Affiliated/Other Party Committees.....  | 0.00                          | 0.00                              |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 34500.00                      | 60000.00                          |
| 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))..       | 37022.00                      | 66035.20                          |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 37022.00                      | 66035.20                          |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

| <b>III. Net Contributions/<br/>Operating Expenditures</b>                            | <b>COLUMN A</b><br>Total This Period | <b>COLUMN B</b><br>Calendar Year-to-Date |
|--|--------------------------------------|--|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....        | 25000.00                             | 55000.00                                 |
| 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) .....    | 25000.00                             | 55000.00                                 |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) ..... | 2522.00                              | 6035.20                                  |
| 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) .....              | 2522.00                              | 6035.20                                  |

# 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 24

(check only one)

|   |                              |                              |                             |
|---|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 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)  
COLORADO WESTERN POLITICAL ACTION COMMITTEE

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

**A. MANSANTCKET (WESTERN) PEQUOT TRIBE**

Mailing Address 2 MATT'S PATH

|                     |             |                   |
|---------------------|-------------|-------------------|
| City<br>MANSANTCKET | State<br>CT | Zip Code<br>06338 |
|---------------------|-------------|-------------------|

FEC ID number of contributing  
federal political committee.

C

Date of Receipt

|             |   |             |   |               |
|-------------|---|-------------|---|---------------|
| M = M<br>09 | / | D = D<br>30 | / | Y = Y<br>2025 |
|-------------|---|-------------|---|---------------|

**Transaction ID : SA11AI.4242**

Amount of Each Receipt this Period

1500.00

 Memo Item

TRIBAL FUNDS

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

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

Aggregate Year-to-Date ▼

1500.00

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

**B. PECHANGA BAND OF INDIANS**

Mailing Address PO BOX 1477

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>TEMECULA | State<br>CA | Zip Code<br>92593 |
|------------------|-------------|-------------------|

FEC ID number of contributing  
federal political committee.

C

Date of Receipt

|             |   |             |   |               |
|-------------|---|-------------|---|---------------|
| M = M<br>09 | / | D = D<br>30 | / | Y = Y<br>2025 |
|-------------|---|-------------|---|---------------|

**Transaction ID : SA11AI.4244**

Amount of Each Receipt this Period

5000.00

 Memo Item

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

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

Aggregate Year-to-Date ▼

5000.00

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

**C. SCOTTS VALLEY BAND OF POMO INDIANS**

Mailing Address 1005 PARALLEL DRIVE

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>LAKEPORT | State<br>CA | Zip Code<br>95453 |
|------------------|-------------|-------------------|

FEC ID number of contributing  
federal political committee.

C

Date of Receipt

|             |   |             |   |               |
|-------------|---|-------------|---|---------------|
| M = M<br>07 | / | D = D<br>11 | / | Y = Y<br>2025 |
|-------------|---|-------------|---|---------------|

**Transaction ID : SA11AI.4235**

Amount of Each Receipt this Period

3000.00

 Memo Item

TRIBAL FUNDS

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

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

Aggregate Year-to-Date ▼

3000.00

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

9500.00

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 Page

FOR LINE NUMBER: PAGE 7 OF 24

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

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NAME OF COMMITTEE (In Full)  
**COLORADO WESTERN POLITICAL ACTION COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. ELECTING MAJORITY MAKING EFFECTIVE REPUBLICANS PAC**

Mailing Address PO BOX 179

|                   |             |                   |
|-------------------|-------------|-------------------|
| City<br>ELK RIVER | State<br>MN | Zip Code<br>55303 |
|-------------------|-------------|-------------------|

FEC ID number of contributing  
federal political committee.

**C C00592089**

Name of Employer (for Individual) | Occupation (for Individual)

Receipt For: Aggregate Year-to-Date ▼

Primary  General  
Other (specify) ▼

**2500.00**

Date of Receipt

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

**Transaction ID : SA11C.4263**

Amount of Each Receipt this Period

**2500.00**

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. NATIONAL ASSOCIATION OF REALTORS**

Mailing Address 430 N. MICHIGAN AVENUE

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>CHICAGO | State<br>IL | Zip Code<br>60611 |
|-----------------|-------------|-------------------|

FEC ID number of contributing  
federal political committee.

**C C70002563**

Name of Employer (for Individual) | Occupation (for Individual)

Receipt For: Aggregate Year-to-Date ▼

Primary  General  
Other (specify) ▼

**5000.00**

Date of Receipt

**M M 12 / D D 18 / Y Y Y Y Y 2025**

**Transaction ID : SA11C.4318**

Amount of Each Receipt this Period

**5000.00**

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. REPUBLICAN GOVERNANCE GROUP/TUESDAY GROUP PAC**

Mailing Address 610 S. BOULEVARD

|               |             |                   |
|---------------|-------------|-------------------|
| City<br>TAMPA | State<br>FL | Zip Code<br>33606 |
|---------------|-------------|-------------------|

FEC ID number of contributing  
federal political committee.

**C C00433060**

Name of Employer (for Individual) | Occupation (for Individual)

Receipt For: Aggregate Year-to-Date ▼

Primary  General  
Other (specify) ▼

**5000.00**

Date of Receipt

**M M 07 / D D 11 / Y Y Y Y Y 2025**

**Transaction ID : SA11C.4238**

Amount of Each Receipt this Period

**5000.00**

Memo Item

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

**12500.00**

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

**12500.00**

# 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 24

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

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NAME OF COMMITTEE (In Full)  
**COLORADO WESTERN POLITICAL ACTION COMMITTEE**

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

**A. REPUBLICAN MAINSTREET PARTNERSHIP PAC**

Mailing Address 411 NEW JERSEY AVENUE SE

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>WASHINGTON | State<br>DC | Zip Code<br>20003 |
|--------------------|-------------|-------------------|

FEC ID number of contributing  
federal political committee.**C C00165159**

Date of Receipt

|           |             |                     |
|-----------|-------------|---------------------|
| M M<br>11 | / D D<br>21 | / Y Y Y Y Y<br>2025 |
|-----------|-------------|---------------------|

**Transaction ID : SA11C.4261**

Amount of Each Receipt this Period

3000.00

 Memo Item

Name of Employer (for Individual) Occupation (for Individual)

Receipt For: Aggregate Year-to-Date ▼

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

3000.00

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**

Date of Receipt

|     |       |             |
|-----|-------|-------------|
| M M | / D D | / Y Y Y Y Y |
|-----|-------|-------------|

Amount of Each Receipt this Period

|   |   |   |   |   |
|---|---|---|---|---|
| , | , | , | , | , |
|---|---|---|---|---|

 Memo Item

Name of Employer (for Individual) Occupation (for Individual)

Receipt For: Aggregate Year-to-Date ▼

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

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**

Date of Receipt

|     |       |             |
|-----|-------|-------------|
| M M | / D D | / Y Y Y Y Y |
|-----|-------|-------------|

Amount of Each Receipt this Period

|   |   |   |   |   |
|---|---|---|---|---|
| , | , | , | , | , |
|---|---|---|---|---|

 Memo Item

Name of Employer (for Individual) Occupation (for Individual)

Receipt For: Aggregate Year-to-Date ▼

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

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

3000.00

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

15500.00

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

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

FOR LINE NUMBER: PAGE 9 OF 24

(check only one)

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

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NAME OF COMMITTEE (In Full)  
**COLORADO WESTERN POLITICAL ACTION COMMITTEE**

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

**A. COLORADO RED WAVE VICTORY FUND**Mailing Address 9235 N UNION BLVD  
STE 150-164

City COLORADO SPRINGS State CO Zip Code 80920

FEC ID number of contributing  
federal political committee.**C C00880369**

Date of Receipt

|                                    |   |                                    |   |  |
|------------------------------------|---|------------------------------------|---|--|
| <input type="checkbox"/> M M<br>07 | / | <input type="checkbox"/> D D<br>01 | / | <input type="checkbox"/> Y Y Y Y Y<br>2025 |
|------------------------------------|---|------------------------------------|---|--|

**Transaction ID : SA12.4234**

Amount of Each Receipt this Period

124.45

 Memo Item

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:

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

Aggregate Year-to-Date ▼

124.45

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

**B. HURD VICTORY FUND**

Mailing Address 2318 CURTIS STREET

City DENVER State CO Zip Code 80205

FEC ID number of contributing  
federal political committee.**C C00913459**

Date of Receipt

|                                    |   |                                    |   |  |
|------------------------------------|---|------------------------------------|---|--|
| <input type="checkbox"/> M M<br>09 | / | <input type="checkbox"/> D D<br>30 | / | <input type="checkbox"/> Y Y Y Y Y<br>2025 |
|------------------------------------|---|------------------------------------|---|--|

**Transaction ID : SA12.4246**

Amount of Each Receipt this Period

11072.35

 Memo Item

TRANSFER OF NET JFC PROCEEDS

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

**C. ADAMS, SCARLETT, , ,**

Mailing Address PO BOX 6880

City SNOWMASS State CO Zip Code 81615

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

Date of Receipt

|                                    |   |                                    |   |  |
|------------------------------------|---|------------------------------------|---|--|
| <input type="checkbox"/> M M<br>09 | / | <input type="checkbox"/> D D<br>06 | / | <input type="checkbox"/> Y Y Y Y Y<br>2025 |
|------------------------------------|---|------------------------------------|---|--|

**Transaction ID : SA12.4246.0**

Amount of Each Receipt this Period

520.00

 Memo ItemName of Employer (for Individual) Occupation (for Individual)  
CROWN CHOCOLATE MARKETING

Receipt For:

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

Aggregate Year-to-Date ▼

520.00

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

11196.80

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 10 OF 24

(check only one)

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

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NAME OF COMMITTEE (In Full)  
COLORADO WESTERN POLITICAL ACTION COMMITTEE

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

**A. JOLLEY, KENT, , ,**

Mailing Address 832 CANYON CREEK DRIVE

|                          |             |                   |
|--------------------------|-------------|-------------------|
| City<br>GLENWOOD SPRINGS | State<br>CO | Zip Code<br>81601 |
|--------------------------|-------------|-------------------|

FEC ID number of contributing  
federal political committee.

C

Date of Receipt

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

**Transaction ID : SA12.4246.1**

Amount of Each Receipt this Period

1500.00

Memo Item

Name of Employer (for Individual)

SELF

Occupation (for Individual)

AGRICULTURE

Receipt For:

Primary  General  
Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

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

**B. JOLLEY, ANNE, , ,**

Mailing Address 832 CANYON CREEK DRIVE

|                          |             |                   |
|--------------------------|-------------|-------------------|
| City<br>GLENWOOD SPRINGS | State<br>CO | Zip Code<br>81601 |
|--------------------------|-------------|-------------------|

FEC ID number of contributing  
federal political committee.

C

Date of Receipt

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

**Transaction ID : SA12.4246.2**

Amount of Each Receipt this Period

1500.00

Memo Item

Name of Employer (for Individual)

SELF

Occupation (for Individual)

AGRICULTURE

Receipt For:

Primary  General  
Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

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

**C. SMITH, TIFFANY, , ,**

Mailing Address 4516 BELKNAP ROAD

|                   |             |                   |
|-------------------|-------------|-------------------|
| City<br>CHARLOTTE | State<br>NC | Zip Code<br>28211 |
|-------------------|-------------|-------------------|

FEC ID number of contributing  
federal political committee.

C

Date of Receipt

M M M /  D D D /  Y Y Y Y Y  
09 30 2025

**Transaction ID : SA12.4246.3**

Amount of Each Receipt this Period

5000.00

Memo Item

Name of Employer (for Individual)

FULL CIRCLE

Occupation (for Individual)

BUSINESS OWNER

Receipt For:

Primary  General  
Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

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

0.00

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

0.00

# 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 24

(check only one)

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

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NAME OF COMMITTEE (In Full)  
COLORADO WESTERN POLITICAL ACTION COMMITTEE

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

A. SMITH, SCOTT, , ,

Mailing Address 4516 BELKNAP ROAD

|                   |             |                   |
|-------------------|-------------|-------------------|
| City<br>CHARLOTTE | State<br>NC | Zip Code<br>28211 |
|-------------------|-------------|-------------------|

FEC ID number of contributing  
federal political committee.

C

Date of Receipt

|             |   |             |   |               |
|-------------|---|-------------|---|---------------|
| M = M<br>09 | / | D = D<br>30 | / | Y = Y<br>2025 |
|-------------|---|-------------|---|---------------|

Transaction ID : SA12.4246.4

Amount of Each Receipt this Period

5000.00

 Memo Item

Name of Employer (for Individual)

FULL CIRCLE

Occupation (for Individual)

BUSINESS OWNER

Receipt For:

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

Aggregate Year-to-Date ▼

5000.00

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

B. HURD VICTORY FUND

Mailing Address 2318 CURTIS STREET

|                |             |                   |
|----------------|-------------|-------------------|
| City<br>DENVER | State<br>CO | Zip Code<br>80205 |
|----------------|-------------|-------------------|

FEC ID number of contributing  
federal political committee.

C C00913459

Date of Receipt

|             |   |             |   |               |
|-------------|---|-------------|---|---------------|
| M = M<br>12 | / | D = D<br>31 | / | Y = Y<br>2025 |
|-------------|---|-------------|---|---------------|

Transaction ID : SA12.4265

Amount of Each Receipt this Period

20953.32

 Memo Item

DISTRIBUTION OF NET JFC PROCEEDS

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

C. BENSON, BRUCE, , ,

Mailing Address 3800 BUCHTEL BLVD

#11420

|                |             |                   |
|----------------|-------------|-------------------|
| City<br>DENVER | State<br>CO | Zip Code<br>80210 |
|----------------|-------------|-------------------|

FEC ID number of contributing  
federal political committee.

C

Date of Receipt

|             |   |             |   |               |
|-------------|---|-------------|---|---------------|
| M = M<br>10 | / | D = D<br>10 | / | Y = Y<br>2025 |
|-------------|---|-------------|---|---------------|

Transaction ID : SA12.4265.0

Amount of Each Receipt this Period

5000.00

 Memo Item

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

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

Aggregate Year-to-Date ▼

5000.00

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

20953.32

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 12 OF 24

(check only one)

|                              |                              |                              |  |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|--|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" 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)  
COLORADO WESTERN POLITICAL ACTION COMMITTEE

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

A. BENSON, MARCY, , ,

Mailing Address 3800 BUCHTEL  
#101420

City DENVER State CO Zip Code 80210

FEC ID number of contributing  
federal political committee.

C

Date of Receipt

|             |   |             |   |               |
|-------------|---|-------------|---|---------------|
| M = M<br>10 | / | D = D<br>10 | / | Y = Y<br>2025 |
|-------------|---|-------------|---|---------------|

Transaction ID : SA12.4265.1

Amount of Each Receipt this Period

5000.00

 Memo Item

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

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

Aggregate Year-to-Date ▼

5000.00

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

B. HILDERBRAND, JEFFREY, , ,

Mailing Address PO BOX 1308

City HOUSTON State TX Zip Code 77251

FEC ID number of contributing  
federal political committee.

C

Date of Receipt

|             |   |             |   |               |
|-------------|---|-------------|---|---------------|
| M = M<br>10 | / | D = D<br>27 | / | Y = Y<br>2025 |
|-------------|---|-------------|---|---------------|

Transaction ID : SA12.4265.2

Amount of Each Receipt this Period

5000.00

 Memo Item

Name of Employer (for Individual)

HILLCREST ENERGY

Occupation (for Individual)

CHAIRMAN

Receipt For:

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

Aggregate Year-to-Date ▼

5000.00

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

C. BROWN, ABBY, , ,

Mailing Address 308 S GALENA S STREET

City ASPEN State CO Zip Code 81611

FEC ID number of contributing  
federal political committee.

C

Date of Receipt

|             |   |             |   |               |
|-------------|---|-------------|---|---------------|
| M = M<br>11 | / | D = D<br>06 | / | Y = Y<br>2025 |
|-------------|---|-------------|---|---------------|

Transaction ID : SA12.4265.3

Amount of Each Receipt this Period

5000.00

 Memo Item

Name of Employer (for Individual)

INDY PASS HOLDINGS

Occupation (for Individual)

FINANCE

Receipt For:

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

Aggregate Year-to-Date ▼

5000.00

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

0.00

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 13 OF 24

(check only one)

|                              |                              |                              |  |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|--|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" 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)  
COLORADO WESTERN POLITICAL ACTION COMMITTEE

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

A. BROWN, DOUGLAS, , ,

Mailing Address 308 S GALENA STREET

|               |             |                   |
|---------------|-------------|-------------------|
| City<br>ASPEN | State<br>CO | Zip Code<br>81611 |
|---------------|-------------|-------------------|

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INDY PASS HOLDINGS

Occupation (for Individual)

FINANCE

Receipt For:

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

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

|           |             |                     |
|-----------|-------------|---------------------|
| M M<br>11 | / D D<br>06 | / Y Y Y Y Y<br>2025 |
|-----------|-------------|---------------------|

Transaction ID : SA12.4265.4

Amount of Each Receipt this Period

5000.00

 Memo Item

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:

|                                  |                                  |
|----------------------------------|----------------------------------|
| <input type="checkbox"/> Primary | <input type="checkbox"/> 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

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:

|                                  |                                  |
|----------------------------------|----------------------------------|
| <input type="checkbox"/> Primary | <input type="checkbox"/> 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)..... ►

|      |
|------|
| 0.00 |
|------|

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

|          |
|----------|
| 32150.12 |
|----------|

# 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)

21b  22  23  26  27  
 28a  28b  28c  29  30b

PAGE 14 OF 24

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NAME OF COMMITTEE (In Full)  
COLORADO WESTERN POLITICAL ACTION COMMITTEE

|   |   |   |         |         |   |      |   |   |   |   |   |   |   |    |  |  |    |  |  |      |  |  |  |  |         |
|---|---|---|---------|---------|---|------|---|---|---|---|---|---|---|----|--|--|----|--|--|------|--|--|--|--|---------|
| <p>Full Name (Last, First, Middle Initial)</p> <p><b>A. STRATEGIC COMPLIANCE LLC</b></p> <p>Mailing Address 2318 CURTIS STREET</p> <p>City DENVER State CO Zip Code 80205</p> <p>Purpose of Disbursement COMPLIANCE CONSULTING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Senate <input type="checkbox"/> Other (specify) ▼<br/><input type="checkbox"/> President</p> <p>State: District:</p> |   | <p>Date of Disbursement</p> <table border="1"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>07</td><td></td><td></td><td>12</td><td></td><td></td><td>2025</td><td></td><td></td><td></td><td></td></tr> </table> <p>FEC Identification Number</p> <p><b>C</b></p> <p>Transaction ID : SB21B.4275</p> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr><td>1250.00</td></tr> </table> <p><input type="checkbox"/> Memo Item</p> | M       | M       | / | D    | D | / | Y | Y | Y | Y | Y | 07 |  |  | 12 |  |  | 2025 |  |  |  |  | 1250.00 |
|   |   | M   | M       | /       | D | D    | / | Y | Y | Y | Y | Y |   |    |  |  |    |  |  |      |  |  |  |  |         |
| 07  |   |   | 12      |         |   | 2025 |   |   |   |   |   |   |   |    |  |  |    |  |  |      |  |  |  |  |         |
| 1250.00   |   |   |         |         |   |      |   |   |   |   |   |   |   |    |  |  |    |  |  |      |  |  |  |  |         |
| <p>Category/Type</p> <p>001</p>   |   |   |         |         |   |      |   |   |   |   |   |   |   |    |  |  |    |  |  |      |  |  |  |  |         |
| <p>Full Name (Last, First, Middle Initial)</p> <p><b>B. STRATEGIC COMPLIANCE LLC</b></p> <p>Mailing Address 2318 CURTIS STREET</p> <p>City DENVER State CO Zip Code 80205</p> <p>Purpose of Disbursement COMPLIANCE CONSULTING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Senate <input type="checkbox"/> Other (specify) ▼<br/><input type="checkbox"/> President</p> <p>State: District:</p> |   | <p>Date of Disbursement</p> <table border="1"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>12</td><td></td><td></td><td>08</td><td></td><td></td><td>2025</td><td></td><td></td><td></td><td></td></tr> </table> <p>FEC Identification Number</p> <p><b>C</b></p> <p>Transaction ID : SB21B.4286</p> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr><td>1250.00</td></tr> </table> <p><input type="checkbox"/> Memo Item</p> | M       | M       | / | D    | D | / | Y | Y | Y | Y | Y | 12 |  |  | 08 |  |  | 2025 |  |  |  |  | 1250.00 |
| M   | M | /   | D       | D       | / | Y    | Y | Y | Y | Y |   |   |   |    |  |  |    |  |  |      |  |  |  |  |         |
| 12  |   |   | 08      |         |   | 2025 |   |   |   |   |   |   |   |    |  |  |    |  |  |      |  |  |  |  |         |
| 1250.00   |   |   |         |         |   |      |   |   |   |   |   |   |   |    |  |  |    |  |  |      |  |  |  |  |         |
| <p>Full Name (Last, First, Middle Initial)</p> <p><b>C.</b></p> <p>Mailing Address</p> <p>City State Zip Code</p> <p>Purpose of Disbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Senate <input type="checkbox"/> Other (specify) ▼<br/><input type="checkbox"/> President</p> <p>State: District:</p>   |   | <p>Date of Disbursement</p> <table border="1"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table> <p>FEC Identification Number</p> <p><b>C</b></p> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr><td></td></tr> </table> <p><input type="checkbox"/> Memo Item</p>   | M       | M       | / | D    | D | / | Y | Y | Y | Y | Y |    |  |  |    |  |  |      |  |  |  |  |         |
| M   | M | /   | D       | D       | / | Y    | Y | Y | Y | Y |   |   |   |    |  |  |    |  |  |      |  |  |  |  |         |
|   |   |   |         |         |   |      |   |   |   |   |   |   |   |    |  |  |    |  |  |      |  |  |  |  |         |
|   |   |   |         |         |   |      |   |   |   |   |   |   |   |    |  |  |    |  |  |      |  |  |  |  |         |
| <p><b>SUBTOTAL</b> of Disbursements This Page (optional)..... ►</p> <p><b>TOTAL</b> This Period (last page this line number only)..... ►</p>  |   | <table border="1"> <tr><td>2500.00</td></tr> </table> <table border="1"> <tr><td>2500.00</td></tr> </table>   | 2500.00 | 2500.00 |   |      |   |   |   |   |   |   |   |    |  |  |    |  |  |      |  |  |  |  |         |
| 2500.00   |   |   |         |         |   |      |   |   |   |   |   |   |   |    |  |  |    |  |  |      |  |  |  |  |         |
| 2500.00   |   |   |         |         |   |      |   |   |   |   |   |   |   |    |  |  |    |  |  |      |  |  |  |  |         |

# 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 15 OF 24

21b  22  23  26  27  
 28a  28b  28c  29  30b

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NAME OF COMMITTEE (In Full)  
**COLORADO WESTERN POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ALASKANS FOR NICK BEGICH**

Mailing Address PO BOX 671710

City CHUGIAK State AK Zip Code 99567

Purpose of Disbursement

011

Category/  
Type

Date of Disbursement

M M /  D D /  Y Y Y Y Y  
09 30 2025

FEC Identification Number

C C00792341

Transaction ID : SB23.4277

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. ALASKANS FOR NICK BEGICH**

Mailing Address PO BOX 671710

City CHUGIAK State AK Zip Code 99567

Purpose of Disbursement

011

Category/  
Type

Date of Disbursement

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

FEC Identification Number

C C00792341

Transaction ID : SB23.4287

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. ALASKANS FOR NICK BEGICH**

Mailing Address PO BOX 671710

City CHUGIAK State AK Zip Code 99567

Purpose of Disbursement

011

Category/  
Type

Date of Disbursement

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

FEC Identification Number

C C00792341

Transaction ID : SB23.4288

Amount of Each Disbursement this Period

1000.00

Memo Item

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

2500.00

**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 Page

 FOR LINE NUMBER:  
 (check only one)

PAGE 16 OF 24

 21b  22  23  26  27  
 28a  28b  28c  29  30b

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 NAME OF COMMITTEE (In Full)  
**COLORADO WESTERN POLITICAL ACTION COMMITTEE**

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. ANDY BARR FOR SENATE, INC.</b><br>Mailing Address PO BOX 2059<br>City LEXINGTON State KY Zip Code 40588<br>Purpose of Disbursement<br>Candidate Name BARR, GARLAND ANDY, , ,<br>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2026<br>State: KY District: 00 Category/Type 011<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br>Other (specify) ▼            |  | Date of Disbursement<br><input type="checkbox"/> M <input type="checkbox"/> M / <input type="checkbox"/> D <input type="checkbox"/> D / <input type="checkbox"/> Y <input type="checkbox"/> Y <input type="checkbox"/> Y <input type="checkbox"/> Y<br>12 31 2025 |
| Full Name (Last, First, Middle Initial)<br><b>B. ANDY BARR FOR SENATE, INC.</b><br>Mailing Address PO BOX 2059<br>City LEXINGTON State KY Zip Code 40588<br>Purpose of Disbursement<br>Candidate Name BARR, GARLAND ANDY, , ,<br>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2025<br>State: KY District: 00 Category/Type 011<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br>Other (specify) ▼ |  | FEC Identification Number<br><b>C</b> C00467571<br>Transaction ID : SB23.4291<br>Amount of Each Disbursement this Period<br><input type="checkbox"/> 3500.00<br><input type="checkbox"/> Memo Item  |
| Full Name (Last, First, Middle Initial)<br><b>C. BRIAN FITZPATRICK FOR ALL OF US</b><br>Mailing Address PO BOX 939<br>City LANGHORNE State PA Zip Code 19047<br>Purpose of Disbursement<br>Candidate Name FITZPATRICK, BRIAN, , ,<br>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2026<br>State: PA District: 01 Category/Type 011<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br>Other (specify) ▼        |  | Date of Disbursement<br><input type="checkbox"/> M <input type="checkbox"/> M / <input type="checkbox"/> D <input type="checkbox"/> D / <input type="checkbox"/> Y <input type="checkbox"/> Y <input type="checkbox"/> Y <input type="checkbox"/> Y<br>09 30 2025 |
| SUBTOTAL of Disbursements This Page (optional)..... ►  |  | FEC Identification Number<br><b>C</b> C00607416<br>Transaction ID : SB23.4283<br>Amount of Each Disbursement this Period<br><input type="checkbox"/> 1000.00<br><input type="checkbox"/> Memo Item  |
| TOTAL This Period (last page this line number only)..... ►   |  | <input type="checkbox"/> 6000.00  |

**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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 NAME OF COMMITTEE (In Full)  
**COLORADO WESTERN POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. BRIAN FITZPATRICK FOR ALL OF US**

Mailing Address PO BOX 939

City LANGHORNE State PA Zip Code 19047

Purpose of Disbursement

Date of Disbursement

|    |   |   |    |   |   |      |   |   |   |   |   |
|----|---|---|----|---|---|------|---|---|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y | Y | Y |
| 12 |   |   | 31 |   |   | 2025 |   |   |   |   |   |

Candidate Name

FITZPATRICK, BRIAN, , ,

011  
Category/  
TypeOffice Sought:  House  
Senate  
 PresidentDisbursement For: 2026  
 Primary  General  
 Other (specify) ▼

State: PA District: 01

Full Name (Last, First, Middle Initial)

**B. BRIAN FITZPATRICK FOR ALL OF US**

Mailing Address PO BOX 939

City LANGHORNE State PA Zip Code 19047

Purpose of Disbursement

Date of Disbursement

|    |   |   |    |   |   |      |   |   |   |   |   |
|----|---|---|----|---|---|------|---|---|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y | Y | Y |
| 12 |   |   | 31 |   |   | 2025 |   |   |   |   |   |

Candidate Name

FITZPATRICK, BRIAN, , ,

011  
Category/  
TypeOffice Sought:  House  
Senate  
 PresidentDisbursement For: 2025  
 Primary  General  
 Other (specify) ▼

State: PA District: 01

Full Name (Last, First, Middle Initial)

**C. CISCOMANI FOR CONGRESS**

Mailing Address PO BOX 35103

City TUCSON State AZ Zip Code 85740

Purpose of Disbursement

Date of Disbursement

|    |   |   |    |   |   |      |   |   |   |   |   |
|----|---|---|----|---|---|------|---|---|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y | Y | Y |
| 09 |   |   | 30 |   |   | 2025 |   |   |   |   |   |

Candidate Name

CISCOMANI, JUAN, , ,

011  
Category/  
TypeOffice Sought:  House  
Senate  
 PresidentDisbursement For: 2026  
 Primary  General  
 Other (specify) ▼

State: AZ District: 06

FEC Identification Number

|   |           |
|---|-----------|
| C | C00786194 |
|---|-----------|

Transaction ID : SB23.4278

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

Memo Item

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

2500.00

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

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| , | , | , | , | , | , | , | , | , | , | , | , |
|---|---|---|---|---|---|---|---|---|---|---|---|

# SCHEDULE B (FEC Form 3X)

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**COLORADO WESTERN POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

### A. CISCOMANI FOR CONGRESS

Mailing Address PO BOX 35103

City TUCSON State AZ Zip Code 85740

Purpose of Disbursement

Date of Disbursement

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

Candidate Name

CISCOMANI, JUAN, , ,

011  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2026

Primary  General  
 Other (specify) ▼

State: AZ District: 06

FEC Identification Number

C C00786194

Transaction ID : SB23.4297

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

### B. CISCOMANI FOR CONGRESS

Mailing Address PO BOX 35103

City TUCSON State AZ Zip Code 85740

Purpose of Disbursement

Date of Disbursement

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

Candidate Name

CISCOMANI, JUAN, , ,

011  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2026

Primary  General  
 Other (specify) ▼

State: AZ District: 06

FEC Identification Number

C C00786194

Transaction ID : SB23.4298

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

### C. DOUG LAMALFA COMMITTEE

Mailing Address 9460 TEGNER ROAD

City HILMAR State CA Zip Code 95324

Purpose of Disbursement

Date of Disbursement

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

Candidate Name

LAMALFA, DOUG, , ,

011  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2025

Primary  General  
 Other (specify) ▼

State: CA District: 01

FEC Identification Number

C C00509422

Transaction ID : SB23.4299

Amount of Each Disbursement this Period

3500.00

Memo Item

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

5000.00

**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 Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

COLORADO WESTERN POLITICAL ACTION COMMITTEE

|  |  |   |
|--|--|---|
| <p>Full Name (Last, First, Middle Initial)</p> <p><b>A. ELECTGABEEVANS.COM</b></p> <p>Mailing Address PO BOX 350608</p> <p>City WESTMINSTER State CO Zip Code 80035</p> <p>Purpose of Disbursement</p> <p>Candidate Name EVANS, TIMOTHY, , ,</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: CO District: 08</p> |  | <p>Date of Disbursement</p> <p><input type="checkbox"/> M M / <input type="checkbox"/> D D / <input type="checkbox"/> Y Y Y Y Y Y<br/>09 30 2025</p> <p>FEC Identification Number</p> <p><b>C C00849844</b></p> <p><b>Transaction ID : SB23.4276</b></p> <p>Amount of Each Disbursement this Period</p> <p><input type="checkbox"/> 1000.00</p> <p><input type="checkbox"/> Memo Item</p> |
| <p>Full Name (Last, First, Middle Initial)</p> <p><b>B. ELECTGABEEVANS.COM</b></p> <p>Mailing Address PO BOX 350608</p> <p>City WESTMINSTER State CO Zip Code 80035</p> <p>Purpose of Disbursement</p> <p>Candidate Name EVANS, TIMOTHY, , ,</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> <p>State: CO District: 08</p>   |  | <p>Date of Disbursement</p> <p><input type="checkbox"/> M M / <input type="checkbox"/> D D / <input type="checkbox"/> Y Y Y Y Y Y<br/>12 31 2025</p> <p>FEC Identification Number</p> <p><b>C C00849844</b></p> <p><b>Transaction ID : SB23.4303</b></p> <p>Amount of Each Disbursement this Period</p> <p><input type="checkbox"/> 1500.00</p> <p><input type="checkbox"/> Memo Item</p> |
| <p>Full Name (Last, First, Middle Initial)</p> <p><b>C. IOWANS FOR ZACH NUNN</b></p> <p>Mailing Address PO BOX 8036</p> <p>City DES MOINES State IA Zip Code 50301</p> <p>Purpose of Disbursement</p> <p>Candidate Name NUNN, ZACH, , ,</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: IA District: 03</p>      |  | <p>Date of Disbursement</p> <p><input type="checkbox"/> M M / <input type="checkbox"/> D D / <input type="checkbox"/> Y Y Y Y Y Y<br/>09 30 2025</p> <p>FEC Identification Number</p> <p><b>C C00784389</b></p> <p><b>Transaction ID : SB23.4284</b></p> <p>Amount of Each Disbursement this Period</p> <p><input type="checkbox"/> 1000.00</p> <p><input type="checkbox"/> Memo Item</p> |
| <p><b>SUBTOTAL</b> of Disbursements This Page (optional)..... ►</p> <p><b>TOTAL</b> This Period (last page this line number only)..... ►</p>   |  | <p><input type="checkbox"/> 3500.00</p>   |

**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)

|                              |                              |  |                             |                              |
|------------------------------|------------------------------|--|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" 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)  
**COLORADO WESTERN POLITICAL ACTION COMMITTEE**

|   |         |  |       |         |               |    |    |      |
|---|---------|--|-------|---------|---------------|----|----|------|
| Full Name (Last, First, Middle Initial)<br><b>A. IOWANS FOR ZACH NUNN</b><br>Mailing Address PO BOX 11  |         | Date of Disbursement<br><table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; text-align: center;">M M M</td> <td style="width: 33%; text-align: center;">/ D D D</td> <td style="width: 33%; text-align: center;">/ Y Y Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">12</td> <td style="text-align: center;">31</td> <td style="text-align: center;">2025</td> </tr> </table> | M M M | / D D D | / Y Y Y Y Y Y | 12 | 31 | 2025 |
| M M M   | / D D D | / Y Y Y Y Y Y  |       |         |               |    |    |      |
| 12  | 31      | 2025   |       |         |               |    |    |      |
| City<br><b>BONDURANT</b><br>Purpose of Disbursement   |         | FEC Identification Number<br><b>C C00784389</b><br>Transaction ID : SB23.4304  |       |         |               |    |    |      |
| Candidate Name<br><b>NUNN, ZACH, , ,</b>  |         | Amount of Each Disbursement this Period<br><table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 90%;"></td> <td style="width: 10%; text-align: right;">1500.00</td> </tr> </table>  |       | 1500.00 |               |    |    |      |
|   | 1500.00 |  |       |         |               |    |    |      |
| Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: IA District: 03 |         | Category/<br>Type<br><b>011</b><br>Disbursement For: 3500<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼  |       |         |               |    |    |      |
| Full Name (Last, First, Middle Initial)<br><b>B. KEAN, THOMAS H. JR., , ,</b><br>Mailing Address 215 LINDEN AVENUE  |         | Date of Disbursement<br><table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; text-align: center;">M M M</td> <td style="width: 33%; text-align: center;">/ D D D</td> <td style="width: 33%; text-align: center;">/ Y Y Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">12</td> <td style="text-align: center;">31</td> <td style="text-align: center;">2025</td> </tr> </table> | M M M | / D D D | / Y Y Y Y Y Y | 12 | 31 | 2025 |
| M M M   | / D D D | / Y Y Y Y Y Y  |       |         |               |    |    |      |
| 12  | 31      | 2025   |       |         |               |    |    |      |
| City<br><b>WESTFIELD</b><br>Purpose of Disbursement   |         | FEC Identification Number<br><b>C H0NJ07261</b><br>Transaction ID : SB23.4305  |       |         |               |    |    |      |
| Candidate Name<br><b>KEAN, THOMAS H. JR., , ,</b>   |         | Amount of Each Disbursement this Period<br><table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 90%;"></td> <td style="width: 10%; text-align: right;">1500.00</td> </tr> </table>  |       | 1500.00 |               |    |    |      |
|   | 1500.00 |  |       |         |               |    |    |      |
| Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: NJ District: 07 |         | Category/<br>Type<br><b>011</b><br>Disbursement For: 2026<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼  |       |         |               |    |    |      |
| Full Name (Last, First, Middle Initial)<br><b>C. KEN CALVERT FOR CONGRESS COMMITTEE</b><br>Mailing Address PO BOX 2438                                      |         | Date of Disbursement<br><table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; text-align: center;">M M M</td> <td style="width: 33%; text-align: center;">/ D D D</td> <td style="width: 33%; text-align: center;">/ Y Y Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">09</td> <td style="text-align: center;">30</td> <td style="text-align: center;">2025</td> </tr> </table> | M M M | / D D D | / Y Y Y Y Y Y | 09 | 30 | 2025 |
| M M M   | / D D D | / Y Y Y Y Y Y  |       |         |               |    |    |      |
| 09  | 30      | 2025   |       |         |               |    |    |      |
| City<br><b>CORONA</b><br>Purpose of Disbursement  |         | FEC Identification Number<br><b>C C00257337</b><br>Transaction ID : SB23.4280  |       |         |               |    |    |      |
| Candidate Name<br><b>CALVERT, KEN, , ,</b>  |         | Amount of Each Disbursement this Period<br><table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 90%;"></td> <td style="width: 10%; text-align: right;">1000.00</td> </tr> </table>  |       | 1000.00 |               |    |    |      |
|   | 1000.00 |  |       |         |               |    |    |      |
| Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: CA District: 41 |         | Category/<br>Type<br><b>011</b><br>Disbursement For: 2026<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼  |       |         |               |    |    |      |
| SUBTOTAL of Disbursements This Page (optional)..... ►   |         | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 90%;"></td> <td style="width: 10%; text-align: right;">4000.00</td> </tr> </table>   |       | 4000.00 |               |    |    |      |
|   | 4000.00 |  |       |         |               |    |    |      |
| TOTAL This Period (last page this line number only)..... ►  |         | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 90%;"></td> <td style="width: 10%; text-align: right;">,</td> </tr> </table>   |       | ,       |               |    |    |      |
|   | ,       |  |       |         |               |    |    |      |

# SCHEDULE B (FEC Form 3X)

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
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FOR LINE NUMBER:  
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NAME OF COMMITTEE (In Full)  
**COLORADO WESTERN POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. KIGGANS FOR CONGRESS**

Mailing Address P.O. BOX 5042

City VIRGINIA BEACH State VA Zip Code 23471

Purpose of Disbursement

Date of Disbursement

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

Candidate Name

KIGGANS, JENNIFER, , ,

Category/  
Type  
011

Office Sought:  House  
 Senate  
 President

Disbursement For: 2026  
 Primary  General  
 Other (specify) ▼

State: VA District: 02

FEC Identification Number

C C00776120

Transaction ID : SB23.4306

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. LAWLER FOR CONGRESS, INC.**

Mailing Address PO BOX 137

City CHAPPAQUA State NY Zip Code 10514

Purpose of Disbursement

Date of Disbursement

M M /  D D /  Y Y Y Y Y  
 09 30 2025

Candidate Name

Category/  
Type  
011

Office Sought:  House  
 Senate  
 President

Disbursement For: 2026  
 Primary  General  
 Other (specify) ▼

State: NY District: 17

FEC Identification Number

C C00815415

Transaction ID : SB23.4282

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. LAWLER FOR CONGRESS, INC.**

Mailing Address PO BOX 137

City CHAPPAQUA State NY Zip Code 10514

Purpose of Disbursement

Date of Disbursement

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

Candidate Name

LAWLER, MICHAEL VINCENT, , ,

Category/  
Type  
011

Office Sought:  House  
 Senate  
 President

Disbursement For: 2026  
 Primary  General  
 Other (specify) ▼

State: NY District: 17

FEC Identification Number

C C00815415

Transaction ID : SB23.4307

Amount of Each Disbursement this Period

500.00

Memo Item

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

3000.00

**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 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)  
**COLORADO WESTERN POLITICAL ACTION COMMITTEE**

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. LAWLER FOR CONGRESS, INC.</b><br>Mailing Address PO BOX 137<br><br>City CHAPPAQUA      State NY      Zip Code 10514<br><br>Purpose of Disbursement<br><br>Candidate Name<br>LAWLER, MICHAEL VINCENT, , ,<br><br>Office Sought: <input checked="" type="checkbox"/> House      Disbursement For: 2026<br><input type="checkbox"/> Senate      Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> President      Other (specify) ▼<br><br>State: NY      District: 17 |  | Date of Disbursement<br><p>M M / D D / Y Y Y Y Y<br/>         12 31 2025</p><br>FEC Identification Number<br><p>C C00815415<br/> <b>Transaction ID : SB23.4308</b></p><br>Amount of Each Disbursement this Period<br><p>1000.00</p><br><p><input type="checkbox"/> Memo Item</p> |
| Full Name (Last, First, Middle Initial)<br><b>B. MILLER-MEEKS FOR CONGRESS</b><br>Mailing Address PO BOX 33<br><br>City OTTUMWA      State IA      Zip Code 52501<br><br>Purpose of Disbursement<br><br>Candidate Name<br>MILLER-MEEKS, MARIANNETTE JANE, , ,<br><br>Office Sought: <input checked="" type="checkbox"/> House      Disbursement For: 2026<br><input type="checkbox"/> Senate      Primary <input type="checkbox"/> General<br><input type="checkbox"/> President      Other (specify) ▼<br><br>State: IA      District: 01        |  | Date of Disbursement<br><p>M M / D D / Y Y Y Y Y<br/>         09 30 2025</p><br>FEC Identification Number<br><p>C C00558825<br/> <b>Transaction ID : SB23.4281</b></p><br>Amount of Each Disbursement this Period<br><p>1000.00</p><br><p><input type="checkbox"/> Memo Item</p> |
| Full Name (Last, First, Middle Initial)<br><b>C. MILLER-MEEKS FOR CONGRESS</b><br>Mailing Address PO BOX 33<br><br>City OTTUMWA      State IA      Zip Code 52501<br><br>Purpose of Disbursement<br><br>Candidate Name<br>MILLER-MEEKS, MARIANNETTE JANE, , ,<br><br>Office Sought: <input checked="" type="checkbox"/> House      Disbursement For: 2026<br><input type="checkbox"/> Senate      Primary <input type="checkbox"/> General<br><input type="checkbox"/> President      Other (specify) ▼<br><br>State: IA      District: 01        |  | Date of Disbursement<br><p>M M / D D / Y Y Y Y Y<br/>         12 31 2025</p><br>FEC Identification Number<br><p>C C00558825<br/> <b>Transaction ID : SB23.4309</b></p><br>Amount of Each Disbursement this Period<br><p>500.00</p><br><p><input type="checkbox"/> Memo Item</p>  |
| SUBTOTAL of Disbursements This Page (optional)..... ►   |  | <p>2500.00</p>   |
| TOTAL This Period (last page this line number only)..... ►  |  | <p>2500.00</p>   |

# 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 23 OF 24

21b  22  23  26  27  
 28a  28b  28c  29  30b

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NAME OF COMMITTEE (In Full)  
**COLORADO WESTERN POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MILLER-MEEKS FOR CONGRESS**

Mailing Address PO BOX 33

City OTTUMWA State IA Zip Code 52501

Purpose of Disbursement

Date of Disbursement

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

Candidate Name  
MILLER-MEEKS, MARIANNETTE JANE, , ,

Category/  
Type  
011

Office Sought:  House  
 Senate  
 President  
 State: IA District: 01

Disbursement For: 2025  
 Primary  General  
 Other (specify) ▼

FEC Identification Number

C C00558825

Transaction ID : SB23.4310

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. PETE STAUBER FOR CONGRESS**

Mailing Address 23 W CENTRAL ENTRANCE  
PMB #333

City DULUTH State MN Zip Code 55811

Purpose of Disbursement

Date of Disbursement

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

Candidate Name  
STAUBER, PETER ALLEN, , ,

Category/  
Type  
011

Office Sought:  House  
 Senate  
 President  
 State: MN District: 08

Disbursement For: 2026  
 Primary  General  
 Other (specify) ▼

FEC Identification Number

C C00650697

Transaction ID : SB23.4314

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. VALADAO FOR CONGRESS**

Mailing Address 5132 NORTH PALM AVENUE  
#227

City FRESNO State CA Zip Code 93704

Purpose of Disbursement

Date of Disbursement

M M /  D D /  Y Y Y Y Y  
 09 30 2025

Candidate Name  
VALADAO, DAVID, , ,

Category/  
Type  
011

Office Sought:  House  
 Senate  
 President  
 State: CA District: 22

Disbursement For: 2026  
 Primary  General  
 Other (specify) ▼

FEC Identification Number

C C00499392

Transaction ID : SB23.4279

Amount of Each Disbursement this Period

1000.00

Memo Item

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

3000.00

**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 Page

FOR LINE NUMBER:  
(check only one)

PAGE 24 OF 24

|                              |                              |  |                             |                              |
|------------------------------|------------------------------|--|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" 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)  
COLORADO WESTERN POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

### A. VALADAO FOR CONGRESS

Mailing Address 5132 NORTH PALM AVENUE  
#227

City FRESNO State CA Zip Code 93704

Purpose of Disbursement

011

Candidate Name  
VALADAO, DAVID, , ,

Office Sought:  House  
Senate  
 President

Disbursement For: 2026  
 Primary  
 General  
Other (specify) ▼

State: CA District: 22

Date of Disbursement

|                            |                            |   |                            |                            |   |                            |                            |                            |                            |
|----------------------------|----------------------------|---|----------------------------|----------------------------|---|----------------------------|----------------------------|----------------------------|----------------------------|
| <input type="checkbox"/> M | <input type="checkbox"/> M | / | <input type="checkbox"/> D | <input type="checkbox"/> D | / | <input type="checkbox"/> Y | <input type="checkbox"/> Y | <input type="checkbox"/> Y | <input type="checkbox"/> Y |
| 12                         |                            |   | 31                         |                            |   | 2025                       |                            |                            |                            |

FEC Identification Number

|                                       |           |
|---------------------------------------|-----------|
| <input checked="" type="checkbox"/> C | C00499392 |
|---------------------------------------|-----------|

Transaction ID : SB23.4311

Amount of Each Disbursement this Period

|        |
|--------|
| 500.00 |
|--------|

Memo Item

Full Name (Last, First, Middle Initial)

### B. VALADAO FOR CONGRESS

Mailing Address 5132 NORTH PALM AVENUE  
#227

City FRESNO State CA Zip Code 93704

Purpose of Disbursement

011

Candidate Name  
VALADAO, DAVID, , ,

Office Sought:  House  
Senate  
 President

Disbursement For: 2025  
 Primary  
 General  
Other (specify) ▼

State: CA District: 22

Date of Disbursement

|                            |                            |   |                            |                            |   |                            |                            |                            |                            |
|----------------------------|----------------------------|---|----------------------------|----------------------------|---|----------------------------|----------------------------|----------------------------|----------------------------|
| <input type="checkbox"/> M | <input type="checkbox"/> M | / | <input type="checkbox"/> D | <input type="checkbox"/> D | / | <input type="checkbox"/> Y | <input type="checkbox"/> Y | <input type="checkbox"/> Y | <input type="checkbox"/> Y |
| 12                         |                            |   | 31                         |                            |   | 2025                       |                            |                            |                            |

FEC Identification Number

|                                       |           |
|---------------------------------------|-----------|
| <input checked="" type="checkbox"/> C | C00499392 |
|---------------------------------------|-----------|

Transaction ID : SB23.4312

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

Memo Item

Full Name (Last, First, Middle Initial)

### C. YOUNG KIM FOR CONGRESS

Mailing Address PO BOX 17490

City ANAHEIM State CA Zip Code 92817

Purpose of Disbursement

011

Candidate Name  
KIM, YOUNG, , ,

Office Sought:  House  
Senate  
 President

Disbursement For: 1000  
 Primary  
 General  
Other (specify) ▼

State: CA District: 40

Date of Disbursement

|                            |                            |   |                            |                            |   |                            |                            |                            |                            |
|----------------------------|----------------------------|---|----------------------------|----------------------------|---|----------------------------|----------------------------|----------------------------|----------------------------|
| <input type="checkbox"/> M | <input type="checkbox"/> M | / | <input type="checkbox"/> D | <input type="checkbox"/> D | / | <input type="checkbox"/> Y | <input type="checkbox"/> Y | <input type="checkbox"/> Y | <input type="checkbox"/> Y |
| 09                         |                            |   | 30                         |                            |   | 2025                       |                            |                            |                            |

FEC Identification Number

|                                       |           |
|---------------------------------------|-----------|
| <input checked="" type="checkbox"/> C | C00665638 |
|---------------------------------------|-----------|

Transaction ID : SB23.4285

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

Memo Item

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

2500.00

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

34500.00